

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10523

FILED  
Feb 20, 2010  
Secretary of State

**Entity Name:** HOLIDAY BEACH ON THE GULF PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4121 NANCEE DR  
PANAMA CITY BEACH, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

4121 NANCEE DR  
PANAMA CITY BEACH, FL 32408 US

**New Mailing Address:**

**FEI Number:** 59-3151517

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAROLLA, TED  
4121 NANCEE DR  
PANAMA CITY BEACH, FL 32408 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: V  
Name: NANCE, NANCY  
Address: 4108 NANCEE DR  
City-St-Zip: PANAMA CITY, FL 32408

Title: D  
Name: PEAVY, JACK  
Address: 4129 DANNY DR  
City-St-Zip: PANAMA CITY, FL 32408

Title: PD  
Name: HUGHES, CLIFFORD  
Address: 911 ITCHIA GIN RD.  
City-St-Zip: CARROLLTON, GA 30116

Title: D  
Name: PINNER, TOM  
Address: 4123 DANNY DR  
City-St-Zip: PANAMA CITY, FL 32408

Title: SD  
Name: MOSELEY, JUDY  
Address: 331 MOSELEY LANE  
City-St-Zip: ASHFORD, AL 36312

Title: TD  
Name: MAROLLA, TED  
Address: 4121 NANCEE DR  
City-St-Zip: PANAMA CITY, FL 32408

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TED MAROLLA

TD

02/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date