

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764740

**Entity Name:** WHITE CLIFFS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2393 W. CO. HWY 30A  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

45 SUGAR SAND LANE, SUITE C  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** 59-2493721

**Certificate of Status Desired:** No

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

TARVER, LOYD  
45 SUGAR SAND LANE, SUITE C  
SANTA ROSA BEACH, FL 32459 US

*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:** LOYD TARVER

04/04/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HOHL, LESTER  
Address 4307 PAPIN STREET  
City-State-Zip: ST. LOUIS MO 63110

Title VP  
Name IRWIN, MICHAEL  
Address 2393 W. COUNTY HWY 30A, UNIT 302  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title TREASURER  
Name MOWELL, JOHN  
Address 407 EAST 6TH AVENUE  
City-State-Zip: TALLAHASSEE FL 32303

Title PRESIDENT  
Name ROBERTS, BRANDON  
Address P.O. BOX 1649  
City-State-Zip: RIDGELAND MS 39158

Title DIRECTOR  
Name MURPHY, GERARD  
Address 669 PRIVATE ROAD 1703  
City-State-Zip: ENTERPRISE AL 36330

Title SECRETARY  
Name GRENFELL, RAY  
Address 27 PROVENCE BLVD  
City-State-Zip: MADISON MS 39110

*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:** BRANDON ROBERTS

04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date