Entity Name: THE COTTAGES AT BLUE MOUNTAIN BEACH OWNERS' ASSOCIATION, INC.

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2441 U S HWY 98 W SUITE 101 SANTA ROSA BEACH, FL 32459

DOCUMENT# N0400002147

Current Mailing Address:

2441 U S HWY 98 W SUITE 101 SANTA ROSA BEACH, FL 32459 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

MCGILL, ROBERT E III 36008 EMERALD COAST PARKWAY SUTIE 301 DESTIN, FL 32541 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title		Title	D
Title	D	Title	D
Name	PICKENS, STEVE	Name	COONER, DEBBIE
Address	2441 U S HWY 98 W SUITE 101	Address	2441 U S HWY 98 W SUITE 101
City-State-Zip:	SANTA ROSA BEACH FL 32459	City-State-Zip:	SANTA ROSA BEACH FL 32459
Title	D	Title	D
Name	WHISTON, ED	Name	MCQUEEN, KYLE
Address	2441 U S HWY 98 W SUITE 101	Address	2441 U S HWY 98 W SUITE 101
City-State-Zip:	SANTA ROSA BEACH FL 32459	City-State-Zip:	SANTA ROSA BEACH FL 32459
Title	D	Title	D
Title Name	D MATHEWS, SAM	Title Name	D EDWARDS, BRAD
	-		
Name	MATHEWS, SAM 2441 U S HWY 98 W SUITE 101	Name	EDWARDS, BRAD 2441 U S HWY 98 W SUITE 101
Name Address	MATHEWS, SAM 2441 U S HWY 98 W SUITE 101	Name Address	EDWARDS, BRAD 2441 U S HWY 98 W SUITE 101
Name Address City-State-Zip:	MATHEWS, SAM 2441 U S HWY 98 W SUITE 101 SANTA ROSA BEACH FL 32459	Name Address	EDWARDS, BRAD 2441 U S HWY 98 W SUITE 101
Name Address City-State-Zip: Title	MATHEWS, SAM 2441 U S HWY 98 W SUITE 101 SANTA ROSA BEACH FL 32459 D	Name Address	EDWARDS, BRAD 2441 U S HWY 98 W SUITE 101

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: DEBBIE COONER DIRECTOR 04/29/2015

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date