03/15/2006 00:39 7707490445 PCPS
03/15/2006 10:14 FAX 8502346842 Sea Side Villas

FILED
Mar 20, 2006 8:00 am
Secretary of State

02-27-2006 90083 002 ****61.25

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2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

2/2

DOCUMENT # 723770

1. Entity Name

SEASIDE VILLAS CONDOMINIUM ASSOCIATION, INC

Principal Place of Business	Mailing Address
4701 THOMAS DRIVE PANAMA CITY BEACH FL 32408-7321	4701 THOMAS DRIVE PANAMA CITY BEACH FL 32408-7321

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E037 (10/05)

4. FEI Number: 59-1439217 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TILLERY, ROCKY
4701 THOMAS DR.
203
PANAMA CITY FL 32408

7. Name and Address of New Registered Agent

Name: Tillery, Rocky
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] DATE: 02/07/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TRAMMELL, NEWTON JR 07 KINGSMILL WALK NE ATLANTA GA 30307	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Tillery, Rocky 1144 Huntington RD Cedartown GA 30125 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MOTTICE, JAY 900 SUMMERBROOKE DR. TALLAHASSEE FL 32312	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Cothran, Robert 4950 Shannon Way Mableton GA 30126 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COTHRAN, ROBERT 4950 SHANNON WAY MABLETON GA 30126	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Mottice, Jay 300 Summerbrooke DR Tallahassee FL 32312 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HAIGLER, ANN 1227 OLD FORT RD. FORT DEPOSIT AL 36032	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Don LyBrand 4701 Thomas DR #215 Panama City BCH FL 32408 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TILLERY, ROCKY 1144 HUNTINGTON RD CEDARTOWN GA 30125	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pat Hand 380 Eagle DR Panama City BCH FL 32413 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D John Weisbrech 303 E Far Hills DR E. Peoria IL 61611 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 03/15/06 850-234-6587

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

66005890

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

SEASIDE VILLAS CONDOMINIUM ASSOCIATION, INC
4701 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408-7321

Subject: **SEASIDE VILLAS CONDOMINIUM ASSOCIATION, INC**

Reference Number: **723770**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH
ANNUAL REPORTS SECTION

3/15/06 Please find enclosed.
Thanks,
Jane Tolson