2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728708

FILED Jan 17, 2007 Secretary of State

Entity Name: GULFGATE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8200 SURF DRIVE PANAMA CITY BEACH, FL 32408 **Current Mailing Address: New Mailing Address:** 8200 SURF DRIVE PANAMA CITY BEACH, FL 32408 FEI Number: 59-1543313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MIXON PROPERTIES RESORT RENTALS, INC. 8200 SURF DR PANAMA CITY BCH, FL 32408 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DELIE, DAVID Name: Name: P.O. BOX 38403 Address: Address: City-St-Zip: PANAMA CITY, FL 32411 City-St-Zip: Title: () Delete Title: (X) Change () Addition ARMISTEAD, WILLIAM Name: PHILLIPS, JOEY Name: Address: 8200 SURF DRIVE, #401 Address: 8200 SURF DRIVE, #211 City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: () Delete Title: () Change () Addition HENSLEY, DAVID Name: Name: 8200 SURF DR. UNIT 207 Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: (X) Change () Addition Title: VΡ () Delete Title: Name: PHILLIPS, JOEY Name: HARLESS, DAVID 8200 SURF DR #211 8200 SURF DR #204 Address: Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: () Delete Title: (X) Change () Addition ELLIOTT, WILLIAM LOWERY, VERNON Name: Name: 8200 SURF DR UNIT 202 8200 SURF DR UNIT 202 Address: Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: () Delete Title: () Change () Addition MIXON, MICHAEL Name: Name: Address: 8200 SURF DR OFC Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL L. MIXON SEC 01/17/2007