

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735251

FILED
Apr 29, 2008
Secretary of State

Entity Name: CONTINENTAL CONDOMINIUM MANAGEMENT, INC.

Current Principal Place of Business:

15413 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

15413 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 62-0977168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOLIN, SUE
558 NORTH LAKESHORE DR
PANAMA CITY, FL 32413 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: T () Delete
Name: ALONGI, ROBERT
Address: 7802 MICHAEL LN
City-St-Zip: HUNTSVILLE, AL

Title: P () Delete
Name: CUNNINGHAM, RICK
Address: 4208 WEST HWY 98
City-St-Zip: PANAMA CITY, FL 32401

Title: S () Delete
Name: TURNER, NANCY
Address: 2805 HARRISON PLACE
City-St-Zip: LAWRENCE, KS 66047

Title: D () Delete
Name: WISEMAN, BRUCE
Address: 1179 KINLOCK DR
City-St-Zip: TROY, MI 48098

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WISEMAN, BRUCE
Address: 1179 KINLOCK DR
City-St-Zip: TROY, MI 48098

Title: P (X) Change () Addition
Name: BUTLER, MIKE
Address: 6770 ARNO ALLISONA
City-St-Zip: COLLEGE GROVE, TN 37046

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MILSTEAD, WAYNE
Address: 1262 HUEYTOWN RD
City-St-Zip: HUEYTOWN, AL 35023

Title: D () Change (X) Addition
Name: PHILLIPS, SCOTT
Address: 134 HURRICANE SCHOALS RD
City-St-Zip: LAWRENCEVILLE, GA 30045

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE WISEMAN

T

04/29/2008

Electronic Signature of Signing Officer or Director

Date