

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746158

FILED
Apr 09, 2009
Secretary of State

Entity Name: DUNES OF PANAMA PHASE II ASSOCIATION,INC.

Current Principal Place of Business:

7205 THOMAS DR BLD C
PANAMA CITY BEACH, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

7205 THOMAS DR., BLD C
PANAMA CITY, FL 32408

New Mailing Address:

FEI Number: 59-1964017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYNARD, JEFF D.
7205 THOMAS DR. BLDG C.
PANAMA CITY, FL 32408 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: TD () Delete
Name: HIRSCH, ROBERT
Address: 345 EAGLE DR.
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: BANACH, DR. WARREN
Address: 112 ABBEY LN
City-St-Zip: ENTERPRISE, AL 36330

Title: SD () Delete
Name: FURLOUGH, ROBERT
Address: 228 ROSEHILL DR N
City-St-Zip: TALLAHASSEE, FL 32312

Title: PD () Delete
Name: WATTS, JIMMY
Address: 65 COVENTRY
City-St-Zip: TUSCALOOSA, AL 35404

Title: V () Delete
Name: BRIDGES, WORTH W.
Address: 810 W 6TH ST
City-St-Zip: TIFTON, GA 31794

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: HIRSCH, ROBERT
Address: 345 EAGLE DR.
City-St-Zip: PANAMA CITY, FL 32408

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

Title: SD (X) Change () Addition
Name: FURLOUGH, ROBERT DR
Address: 228 ROSEHILL DR N
City-St-Zip: TALLAHASSEE, FL 32312

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

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

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: JEFF MYNARD

RA

04/09/2009

Electronic Signature of Signing Officer or Director

Date