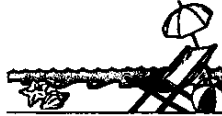


2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 750143 1. Entity Name OKALOOSA ISLAND LEASEHOLDERS ASSOCIATION, INC.						FILED 07 JUL 16 PM 1:19 STATE OF FLORIDA	
Principal Place of Business 721 SAILFISH DRIVE FORT WALTON BEACH, FL 32548 US				Mailing Address P.O. BOX 8116 FT WALTON BEACH, FL 32548-8116 US			
2. Principal Place of Business - No P.O. Box # 529 DOLPHIN AVE				3. Mailing Address Suite, Apt. #, etc.			
City & State FORT WALTON BEACH, FL				City & State Suite, Apt. #, etc.			
Zip 32548		Country U.S.A.		4. FEI Number 59-1929840		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BEDNAR, MARYLA 721 SAILFISH DRIVE FORT WALTON BEACH, FL 32548				7. Name and Address of New Registered Agent Name PAULA HUDSON Street Address (P.O. Box Number is Not Acceptable) 529 DOLPHIN AVE City FORT WALTON BEACH FL Zip Code 32548			
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 PAULA HUDSON Signature, typed or printed name of registered agent and title if applicable.				<i>Paula Hudson</i> (NOTE: Registered Agent signature required when reinstating)			
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, CHARLENE 718 SAILFISH DRIVE FORT WALTON BEACH, FL 32548	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 400106409324 07/19/07--01056--013 **\$1.25			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEDNAR, MARYLA 721 SAILFISH DR FORT WALTON BEACH, FL 32548	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition PD HUDSON, PAULA 529 DOLPHIN AVE FT WALTON BEACH, FL 32548			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, MIKE 616 PELICAN DRIVE FORT WALTON BEACH, FL 32548	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition DV <i>[Signature]</i>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIMPSON, JIM 624B PELICAN DRIVE FT WALTON BEACH, FL 32548	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, KATHY 849 TARPON DR FT WALTON BEACH, FL 32548	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition D VALANTINE, LINDA 512 DORY AVE FT WALTON BEACH, FL 32548			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, CECIL 816 TARPON DR FT WALTON BEACH, FL 32548	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition D SCHAEFFLER, SCOTT 659 FAIRWAY AVE NE FT WALTON BEACH, FL 32547			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: PAULA HUDSON SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				<i>Paula Hudson</i> Date			
7-13-07				(850) 243-8569 Daytime Phone #			



**OKALOOSA ISLAND LEASEHOLDERS ASSOCIATION, INC.
P.O. BOX 8116
FORT WALTON BEACH, FL 32548**

TO: Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJ: Amended 2007 Not-For-Profit Annual Report – Okaloosa Island Leaseholders Association,
Document # 750143

DATE: July 13, 2007

Dear Sirs:

Attached is an amended 2007 Not-For-Profit Annual Report for the Okaloosa Island Leaseholders Association, Document #750143 and payment in the amount of \$61.25 for the filing fee.

Following is a continuation of Paragraphs 10 (Officers and Directors) and 11 (Additions/Changes to Officers and Directors in 10) to the attached report.

Please delete the following Director:

Title: DV
Name: Corbo, Nick
Street Address: 722 Sailfish Drive
City/State/Zip: Fort Walton Beach, FL 32548

Please continue without change the following Director:

Title: D
Name: Jensen, Cynthia L.
Street Address: 517 Dorado Drive
City/State/Zip: Fort Walton Beach, FL 32548

Please add the following Director:

Title: D
Name: Dowd Jr, John
Street Address: 509 Dory Ave
City/State/Zip: Fort Walton Beach, FL 32548

If you have any questions concerning this amended annual report, please contact Jim Simpson, Treasurer, at (850) 301-3547, or email him at: sanleanna@cox.net.

Best regards,

Paula Hudson, President
Okaloosa Island Leaseholders Association, Inc.
(850) 243-8569