

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750143

FILED
Apr 15, 2009
Secretary of State

Entity Name: OKALOOSA ISLAND LEASEHOLDERS ASSOCIATION, INC.

Current Principal Place of Business:

529 DOLPHIN AVE
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8116
FT WALTON BEACH, FL 325488116 US

New Mailing Address:

FEI Number: 59-1929840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, PAULA
529 DOLPHIN AVE
FORT WALTON BEACH, FL 32548 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: D () Delete
Name: MILLER, DAVID
Address: 590 SANTA ROSA BLVD #602
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: PD () Delete
Name: HUDSON, PAULA
Address: 529 DOLPHIN AVE
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: DV () Delete
Name: TURNER, GLORIA
Address: 865 BRANDE CT
City-St-Zip: SHALMAR, FL 32579

Title: T () Delete
Name: SIMPSON, JIM
Address: 624B PELICAN DRIVE
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: VALENTINE, LINDA
Address: 512 DORY AVE
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: SCHAEFFLER, SCOTT
Address: 659 FAIRWAY AVE NE
City-St-Zip: FT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MILLER, DAVID
Address: 590 SANTA ROSA BLVD #602
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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

Title: DV (X) Change () Addition
Name: TURNER, GLORIA
Address: 865 BRANDE CT
City-St-Zip: SHALMAR, FL 32579 US

Title: DS (X) Change () Addition
Name: PARKER, CARMEN
Address: 708 SAILFISH DR
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: D (X) Change () Addition
Name: VALENTINE, LINDA
Address: 512 DORY AVE
City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: D (X) Change () Addition
Name: SCHAEFFLER, SCOTT
Address: 659 FAIRWAY AVE NE
City-St-Zip: FT WALTON BEACH, FL 32547 US

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: PAULA HUDSON

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date