

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751617

FILED
Jan 16, 2009
Secretary of State

Entity Name: LINKSIDE VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

12273 US HWY 98
STE 208
DESTIN, FL 32550 US

Current Mailing Address:

12273 US HWY 98
STE 208
DESTIN, FL 32550 US

New Principal Place of Business:

36468 EMERALD COAST PARKWAY
SUITE 8101
DESTIN, FL 32541 US

New Mailing Address:

36468 EMERALD COAST PARKWAY
SUITE 8101
DESTIN, FL 32541 US

FEI Number: 59-2004507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARNES, JIM
12273 US HWY 98
SUITE 208
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

STARNES, JIM
36468 EMERALD COAST PARKWAY
SUITE 8101
DESTIN, FL 32541 US

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: JIM STARNES

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: BOLEN, JIM
Address: 420 LINKSIDE DR
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: P () Delete
Name: SEALE, PETER
Address: 2 SANDESTINE ESTATES
City-St-Zip: DESTIN, FL 32550

Title: D () Delete
Name: PERDUE, JAMES C
Address: 492 LINKSIDE PL
City-St-Zip: DESTIN, FL 32550

Title: D () Delete
Name: WAALAND, ART
Address: 3892 SILK LEAF WAY
City-St-Zip: BUFORD, GA 30519

Title: D () Delete
Name: MOFFATT, BOB
Address: 1609 SOUTH BROOK LANE
City-St-Zip: TALLAHASSEE, FL 32312

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SEALE, PETE
Address: 2 SANDESTINE ESTATES
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: VP (X) Change () Addition
Name: SCHILLING, JOBY
Address: 2512 HIDDEN HILLS DRIVE, SUITE 101B
City-St-Zip: MARIETTA, GA 30066

Title: ST (X) Change () Addition
Name: BOCCHINI, JIM
Address: 464 LINKSIDE DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550

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

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

Title: D () Change (X) Addition
Name: DEVAUGHN, LORI
Address: 412 LINKSIDE LANE
City-St-Zip: MIRAMAR BEACH, FL 32550

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: PETE SEALE

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date