2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# 754671

Entity Name: SAILFISH YACHT CLUB CONDOMINIUM ASSOCIATION,INC.

Current Principal Place of Business:

504 HARBOR BLVD
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

504 HARBOR BLVD
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-2250351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFOE, SALLY JUNE
504 HARBOR BLVD
DESTIN, FL 32541 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:	SUTHERLAND, GINA	
Address:	900 ALBERTA ST.	
City-St-Zip:	ENTERPRISE, AL 36330	
Title:	VPD	( ) Delete
Name:	NICHOLSON, ROLAND	
Address:	4713 BAYSIDE BLVD	
City-St-Zip:	MILTON, FL 32583	
Title:	P	( ) Delete
Name:	BRIDGERS, MARK	
Address:	431 S MAIN ST	
City-St-Zip:	POPLARVILLE, MS 39470	
Title:	D	( ) Delete
Name:	SANDVOSS, BERT	
Address:	5425 WESTWOOD DR	
City-St-Zip:	MILTON, FL 32570	
Title:	D	( ) Delete
Name:	GREEN, ELLSWORTH	
Address:	14925 DANTZLER RD.	
City-St-Zip:	OCEAN SPRINGS, MS 39564	
Title:	S	( ) Delete
Name:	ELLISON, JIM E	
Address:	5329 HWY 331	
City-St-Zip:	CHELSEA, AL 35043	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	ELLISON, JIM E	
Address:	409 PRATTS STATION ROAD	
City-St-Zip:	CLAYTON, AL 36016-453	

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: E. MARK BRIDGERS P 01/08/2009

Electronic Signature of Signing Officer or Director — Date