2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759774

FILED Apr 10, 2009 Secretary of State

Entity Name: CAPRI BY THE GULF HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3100 SCENIC HWY 98 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

P.O. BOX 2613

FORT WALTON BEACH, FL 32548 US

FEI Number: 59-2328926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RDF ASSOCIATES, INC 29-C MIRACLE STRIP PKWY SW FORT WALTON BEACH, FL 32548 US

() Delete

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

BRYANT, TOM ROTH, RICHARD Name: Name:

411 BERKSHIRE DR Address: 3100 SCENIC HIGHWAY 98E Address: City-St-Zip: RIDGELAND, MS 39157 US City-St-Zip: DESTIN, FL 32541 US

Title: VPD () Delete Title: (X) Change () Addition ALVORD, GEORGE Name: ALVORD, GEORGE Name:

Address: 3431 LAKE POINTE Address: 3431 LAKE POINTE City-St-Zip: MEMPHIS, TN 38125 US City-St-Zip: MEMPHIS, TN 38125 US

Title: PDTitle: VPD (X) Change () Addition () Delete

DEES, ANNA BEAVY, PATRICIA Name: Name: 13402 AMBER QUEEN LN Address: Address: 4002 VINYARDS LANE City-St-Zip: HOUSTON, TX 77041 US City-St-Zip: KENNESAW, GA 30144 US

() Delete Title: DT Title: DT (X) Change () Addition

Name: SMITH, DOUG Name: KAZEK, DAVID 420 C BAYSHORE Address: Address: 792 BAYSHORE DRIVE City-St-Zip: DESTIN, FL 32550 US City-St-Zip: MIRAMAR, FL 32550 US

Title: () Delete Title: (X) Change () Addition

BEUOY, DICK MOSELY, VIRGINIA Name: Name:

114 COUNTRY CLUB DRIVE WEST 8744 KENSINGTON DRIVE Address: Address:

City-St-Zip: NOBLESVILLE, IN 46060 City-St-Zip: DESTIN, FL 32541

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: ROBERT FOWNER MGR 04/10/2009