2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# 760121

Entity Name: OCEAN TERRACE CONDOMINIUM ASSOCIATION, INC., OF PANAMA CITY

Current Principal Place of Business:

8621 SURF DRIVE
PANAMA CITY BEACH, FL 324084718

New Principal Place of Business:

Current Mailing Address:

C/O STEVE CANNON
3483 HUTCHENSON FX RD
WHITESBURG, GA 30185 US

New Mailing Address:

FEI Number: 59-2190319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SARNO, LYNN
214 EAST SECOND ST
PANAMA CITY, FL 32401 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:	P	( ) Delete
Name:	CANNON, SCOTT	
Address:	8010 JOHNSON RD	
City-St-Zip:	PALMETTO, GA 30268	
Title:	V	( ) Delete
Name:	SARNO, LYNN	
Address:	214 EAST SECOND ST	
City-St-Zip:	PANAMA CITY, FL 32401	
Title:	S	( ) Delete
Name:	CANNON, KAREN	
Address:	8010 JOHNSON RD	
City-St-Zip:	PALMETTO, GA 30268	
Title:	D	( ) Delete
Name:	CANNON, GARFIELD	
Address:	229 COBB ST.	
City-St-Zip:	PALMETTO, GA 30268	
Title:	D	( ) Delete
Name:	GORDON, RANDALL	
Address:	930 NEW HOPE ROAD, SUITE 11-123	
City-St-Zip:	LAWRENCEVILLE, GA 30045	
Title:	D	( ) Delete
Name:	CANNON, MARK	
Address:	15 WELLINGTON MANOR DR	
City-St-Zip:	SHARPSBURG, GA 30277	

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

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: STEVE CANNON TREA 03/20/2009
Electronic Signature of Signing Officer or Director — Date