

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762304

FILED
Jan 08, 2008
Secretary of State

Entity Name: STING RAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8005 SURF DR.
PANAMA CITY, FL 32408

New Principal Place of Business:

Current Mailing Address:

939 JENKS AVE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-2212187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERRITT, THOMAS A
939 JENKS AVE
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: DS () Delete
Name: LANIER, ANN
Address: 3273 GREENHILL DRIVE
City-St-Zip: VILLA RICA, GA 30180

Title: DPT () Delete
Name: BAZARTE, JOSEPH
Address: 407 MARTINIQUE LANE
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: KRUSE, MICHAEL
Address: 4054 YARDLEY CIRCLE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DVP () Delete
Name: MILLS, CLYDE
Address: 820 W 8TH STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: RUMBAUGH, RICHARD
Address: 1015 SHAWNE DRIVE
City-St-Zip: LAGRANGE, GA 30240

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:

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: JOSEPH BAZARTE

DPT

01/08/2008

Electronic Signature of Signing Officer or Director

Date