

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764740

FILED  
Jan 31, 2008  
Secretary of State

Entity Name: WHITE CLIFFS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2313 W. CO. HWY 30A  
SANTA ROSA BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 4785  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

FEI Number: 59-2493721      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HERR, LENORA K  
407 WOODBEACH DRIVE  
SANTA ROSA BEACH, FL 32459 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: DP ( ) Delete  
Name: MOWELL, JOHN  
Address: 407 E 6TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: DV ( ) Delete  
Name: MCCALL, EARL  
Address: P. O. BOX 71468  
City-St-Zip: ALBANY, GA 31708

Title: D ( ) Delete  
Name: KAHN, SHIRLEY  
Address: 2964 BRIARCLIFF ROAD  
City-St-Zip: BIRMINGHAM, AL 35223

Title: D ( ) Delete  
Name: STANER, ELLEN  
Address: 1183 GREYSTONE CREST  
City-St-Zip: BIRMINGHAM, AL 35242

Title: DST ( ) Delete  
Name: DAVIS, CLIFFORD  
Address: P. O. BOX 252  
City-St-Zip: FRIARS POINT, MS 38631

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: WILLIAMSON, JAMES T  
Address: 3512 KINGS HILL ROAD  
City-St-Zip: BIRMINGHAM, AL 35223

Title: DV (X) Change ( ) Addition  
Name: BERMAN, FLOYD  
Address: 3515 RIVER BEND ROAD  
City-St-Zip: BIRMINGHAM, AL 35423

Title: D (X) Change ( ) Addition  
Name: TORREY, RANDY  
Address: P. O. BOX 1621  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DST (X) Change ( ) Addition  
Name: HOWARD, WYN  
Address: P. O. BOX 55748  
City-St-Zip: METAIRIE, LA 70055

Title: D (X) Change ( ) Addition  
Name: HOHL, LESTER  
Address: 943 NORRINGTON WAY  
City-St-Zip: FENTON, MO 63026

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: JAMES T. WILLIAMSON

DP

01/31/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date