2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 766674

Entity Name: SEA MIST TOWNHOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1613 SCENIC GULF DR.
SEAMIST #2
MIRAMAR BEACH, FL 32550

New Principal Place of Business:

Current Mailing Address:

1613 SCENIC GULF DR.
SEAMIST #2
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 06-1668695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPSHAW, DONALD L
1613 SCENIC GULF R.
SEAMIST #2
DESTIN, FL 32550 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:	PD	( ) Delete
Name:	CAPSHAW, DONALD L	
Address:	1613 SCENIC GULF DR., #2	
City-St-Zip:	MIRAMAR BEACH, FL 32550	
Title:	SD	( ) Delete
Name:	DAILEY, JEANNE	
Address:	12815 HWY 98 W., SUITE 100	
City-St-Zip:	MIRAMAR BEACH, FL 32550	
Title:	TD	( ) Delete
Name:	MCCLAIN, PAUL	
Address:	1613 SCENIC GULF DR., #6	
City-St-Zip:	MIRAMAR BEACH, FL 32550	
Title:	VP	( ) Delete
Name:	BRUNSON, DON	
Address:	1613 SCENIC GULF DR, # 4	
City-St-Zip:	MIRAMAR BEACH, FL 32550	

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:	

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: DONALD L. CAPSHAW PD 04/14/2009

Electronic Signature of Signing Officer or Director — Date