

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767081

FILED
Apr 24, 2008
Secretary of State

Entity Name: BLUE MOUNTAIN VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5311 E. COUNTY HWY 30-A
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

5311 E COUNTY HWY 30-A
STE 5
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-2378821 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHIPMAN, GARY A
1414 CO. HWY. 283 S
SUITE B
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: SILSBEE, WILLIAM
Address: 4204 KENNESAW DRIVE
City-St-Zip: BIRMINGHAM, AL 35213

Title: DV () Delete
Name: BISHOP, IVAN
Address: 1415 SUNSET DRIVE
City-St-Zip: ANDALUSIA, AL 36421

Title: DST () Delete
Name: PORTER, JAMES
Address: 214 BLUE MOUNTAIN RD, UNIT 11
City-St-Zip: SANTA ROSA BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: WINBURN, JOHN
Address: 2139 BRIARLAKE TRACE
City-St-Zip: ATLANTA, GA 30345

Title: DST (X) Change () Addition
Name: ROBERTS, FRANK
Address: 5 GARNIERS POST ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

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: WALTER R PRITCHETT

MRG

04/24/2008

Electronic Signature of Signing Officer or Director

Date