


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 768009 1. Entity Name COSTA VISTA HOMEOWNERS' ASSN., INC.						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 08 DEC 19 AM 8:17	
Principal Place of Business 2362 SCENIC GULF DR. DESTIN, FL 32550 US				Mailing Address 2362 SCENIC GULF DR. DESTIN, FL 32550 US			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent GILLELAND, GWEN 2362 SCENIC GULF DRIVE DESTIN, FL 32540				7. Name and Address of New Registered Agent Name Willa Merriott Street Address (P.O. Box Number is Not Acceptable) 12273 12273 Hwy. 98 West #113 City Miramar Beach FL Zip Code 32550			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Willa Merriott</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHILDERS, WOODY <input type="checkbox"/> Delete 2362 SCENIC GULF HWY DESTIN, FL 32540			TITLE NAME STREET ADDRESS CITY-ST-ZIP	Woody Childers <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4832 Arabi Dr. Fairborn OH 45324		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete HULSEY, BARBARA 574 SHADES CREST RD HOOVER, AL 35226			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000139172570 12/15/08-01038-009 **61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete BURG, NANCY 2362 SCENIC GULF HWY DESTIN, FL 32540			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Nancy Green Burg 2460 Oakwood Ave Huntsville AL 35811		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete TAYLOR, REBECCA 2362 SCENIC GULF DRIVE DESTIN, FL 32540			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Richard McCoy 10499 Wellington Walk Dr Jacksonville FL 32256		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Willa Merriott 12273 Hwy. 98 W. #113 Miramar Beach FL 32550		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u><i>Willa Merriott</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				12/17/08 850 <small>Date Daytime Phone #</small>			

837-6836 1026