

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771218

FILED
Jun 20, 2008
Secretary of State

Entity Name: SANTA MONICA BEACH PROPERTY OWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

304 BUENA VISTA AVE.
PANAMA CITY, FL 32413 US

New Principal Place of Business:

124 BUENA VISTA AVE.
PANAMA CITY, FL 32413 US

Current Mailing Address:

P O BOX 7013
PANAMA CITY BEACH, F 32413 US

New Mailing Address:

FEI Number: 59-2344672 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITSON, CHARLES R
304 BUENA VISTA AVE
PANAMA CITY BEACH, FL 32413 US

Name and Address of New Registered Agent:

WHITSON, CHARLES R
124 BUENA VISTA AVE
PANAMA CITY BEACH, FL 32413 US

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

06/20/2008

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAILEY, JOE
Address: 304 BUENA VISTA AVE.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VP () Delete
Name: GRANGER, JOE
Address: 5351 WOODFORD DRIVE
City-St-Zip: BIRMINGHAM, AL 35242

Title: ST () Delete
Name: WHITSON, CHARLES
Address: 208 CHINA STREET
City-St-Zip: TROY, AL 36081

Title: D () Delete
Name: THOMAS, GEORGE
Address: BUENA VISTA AVE.
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: CHARLES R. WHITSON

Electronic Signature of Signing Officer or Director

ST

06/20/2008

Date