2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# F08000001038

Entity Name: COASTAL AREA DISTRICT DEVELOPMENT AUTHORITY, INC.

Current Principal Place of Business:

501 GLOUCESTER ST.
SUITE 201
BRUNSWICK, GA 31520

New Principal Place of Business:

Current Mailing Address:

501 GLOUCESTER ST.
SUITE 201
BRUNSWICK, GA 31520

New Mailing Address:

FEI Number: 58-1395933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, SANDRA W
2110 PARK STREET
JACKSONVILLE, FL 32204 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: CHRM ( ) Delete
Name: ROOT, CRAIG
Address: 501 GLOUCESTER ST. SUITE 201
City-St-Zip: BRUNSWICK, GA 31520

Title: VCHR ( ) Delete
Name: CAUDELL, KEITH
Address: 501 GLOUCESTER ST. SUITE 201
City-St-Zip: BRUNSWICK, GA 31520

Title: PCEO ( ) Delete
Name: STANDARD, ANDREW
Address: 501 GLOUCESTER ST. SUITE 201
City-St-Zip: BRUNSWICK, GA 31520

Title: TCFO ( ) Delete
Name: BLACKWELL, ROBIN
Address: 501 GLOUCESTER ST. SUITE 201
City-St-Zip: BRUNSWICK, GA 31520

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VCHR (X) Change ( ) Addition
Name: KEITH, DELL
Address: 501 GLOUCESTER ST. SUITE 201
City-St-Zip: BRUNSWICK, GA 31520

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: ROBIN L. BLACKWELL CFO 01/07/2009

Electronic Signature of Signing Officer or Director — Date