

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006637

FILED
Apr 26, 2008
Secretary of State

Entity Name: GRAYTON BEACH NEIGHBORHOOD ASSOCIATION INC.

Current Principal Place of Business:

490 DEFUNIAK ST.
GRAYTON BEACH, FL 32459

New Principal Place of Business:

P.O BOX 2162
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

490 DEFUNIAK ST.
GRAYTON BEACH, FL 32459

New Mailing Address:

P.O BOX 2162
SANTA ROSA BEACH, FL 32459

FEI Number: 59-0362938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAHLIE, SHIRLEY
490 DEFUNIAK ST.
GRAYTON BEACH, FL 32459 US

Name and Address of New Registered Agent:

MORRELL, ANN
83 PINE STREET
SANTA ROSA BEACH, FL 32459 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: ANN MORRELL

04/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACKSON, LARRY
Address: 196 MAGNOLIA STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VD () Delete
Name: PROVOW, LESLIE
Address: 18 LUPINE ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: TD () Delete
Name: SAHLIE, SHIRLEY
Address: 490 DEFUNIAK ST.
City-St-Zip: GRAYTON BEACH, FL 32459

Title: SD () Delete
Name: MORRELL, ANN
Address: 83 PINE ST
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: BLACKWELL, GRANT
Address: 319 DEFUNIAK STRET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: EYER, LINDA
Address: 466 DEFUNIAK ST
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MURPHY, PAT
Address: 142 LYDIA
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VD (X) Change () Addition
Name: MOULTRIE, FRANK
Address: 4416 APPALOOSE TRAIL
City-St-Zip: BIRMINGHAM, AL 36242

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: D (X) Change () Addition
Name: EYER, LINDA
Address: 2516 RIVER ROAD
City-St-Zip: CARYVILLE, FL 32427

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: ANN MORRELL

SD

04/26/2008

Electronic Signature of Signing Officer or Director

Date