## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000006803

FILED Apr 26, 2006 Secretary of State

Entity Name: CESSNA LANDING COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:	New Principal Place of Business:
5311 E CO HWY 30A	5311 E CO HWY 30A

SUITE 5 SUITE 3

SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 4703 5311 E COUNTY HWY 30-A

STE 5 SANTA ROSA BEACH, FL 32459 US

SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-3706315 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRITCHETT, WALTER R PRITCHETT, WALTER R 5311 E CO HWY 30-A 5311 E COUNTY HWY 30-A

SANTA ROSA BEACH, FL 32459 US STE 5 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: 04/26/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

THOMPSON, JOHN THOMPSON, JOHN Name: Name: 29 LANTANA CT Address: 159 MALLARD LANE Address:

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DST ( ) Delete Title: DT (X) Change ( ) Addition

FOYE, ED Name: FOYE, ED Name: Address: 110 CLUB WAY Address: 110 CLUB WAY

City-St-Zip: ENTERPRISE, AL 36330 City-St-Zip: ENTERPRISE, AL 36330

Title: () Delete Title: DS (X) Change ( ) Addition

WATSON, FRANK BREED, JOHN Name: Name: Address: Address:

5365 E. CO. HWY. 30-A 76 LOBLOLLY BAY DRIVE City-St-Zip: SEAGROVE BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ( ) Delete Title: () Change () Addition

MCCABE, BRIÁN Name: Name: 512 OLD BEACH RD #43 Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip:

Title: () Delete Title: () Change () Addition

BEAUCHAMP, BRAIN Name: Name: 310 VININGS WAY #8-202 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip:

Title: () Delete Title: () Change () Addition

SMITH, STUART Name: Name: Address: 4076 INDIAN BAYOU LN Address: DESTIN, FL 32541 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN THOMPSON Ρ 04/26/2006