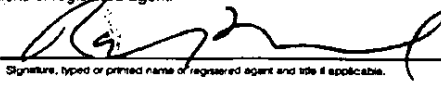
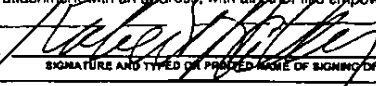


FILED
Jul 21, 2008 8:00 am
Secretary of State

05-01-2008 90180 042 ****61.25

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

5/1

DOCUMENT # N01000002026			
1. Entity Name AMALFI COAST RESORT CONDOMINIUM OWNERS ASSOCIATION, INC.			
Principal Place of Business 778 SCENIC GULF DRIVE #D429 MIRAMAR BEACH, FL 32550		Mailing Address 778 SCENIC GULF DRIVE #D429 MIRAMAR BEACH, FL 32550	
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
		03252008 Chg-NP CR2E037 (12/08)	
4. FEI Number 59-3725635		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GORMLEY, TERRY P. 215 GRAND BLVD SUITE 200 MIRAMAR BEACH, FL 32550		RAYMOND F. NEWMAN, JR. Street Address (P.O. Box Number is Not Acceptable) 338 Miracle Strip Pkwy SW Paradise V. Hays Suite 7 City Ft Walton Bch FL 32548	
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 		RAYMOND F. NEWMAN, JR. 4-10-08 (NOTE: Registered Agent signature required when reinstating) DATE	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	DP HALEY, BOB 338 NEAL HOWELL RD BOWLING GREEN, KY 42104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD DUKE, EDDIE 606 MADDOX RD GRIFFIN, GA 30224 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST MIDGETT, TIM 778 SCENIC GULF DR; UNIT 124-D MIRAMAR BEACH, FL 32550 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARWELL, AL 670 MABLE LAKE RD CUMMING, GA 30041 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ZIMMERMAN, ROBERT N2747 BROWNE LN WAUPACA, WI 54981 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Mullins, James 5525 Wedgwood Ct. Lilburn, GA 30047 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: 		Date Daytime Phone #	