2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005866

FILED Apr 07, 2009 Secretary of State

Entity Name: BEACH COLONY EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

13597 PERDIDO KEY DR PENSACOLA, FL 32507

Current Mailing Address: New Mailing Address:

C/O STEPHENSON RESORT PO BOX 34200 PENSACOLA, FL 32507

FEI Number: 59-3740107 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:

STEPHENSON, BRIAN 13597 PERDIDO KEY DR PENSACOLA, FL 32507 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: SD (X) Change () Addition Name: STOKES, MARGARET M STOKES, MARGARET M

Address: 13597 PERDIDO KEY DR UNIT 16B Address: 13597 PERDIDO KEY DR UNIT 16B

City-St-Zip: PENSACOLA, FL 32522 City-St-Zip: PENSACOLA, FL 32507

Name: GRIFFIN, RAY Name: GRIFFIN, RAY

Address: 13597 PERDIDO KEY DR UNIT 11D Address: 13597 PERDIDO KEY DR UNIT 11D

City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507

Title: PD () Delete Title: () Change () Addition Name: DICKSON, LEWIS H JR Name:

Address: 2322 PAULY BROOK DR Address: City-St-Zip: KNOXVILLE, TN 37932 City-St-Zip:

Title: TD () Delete Title: VD (X) Change () Addition Name: BIRD, TONY Name: BIRD, TONY

Name:BIRD, TONYName:BIRD, TONYAddress:508 CARMENERE DRAddress:508 CARMENERE DR

City-St-Zip: KENNER, LA 70065 City-St-Zip: KENNER, LA 70065

Title: D () Delete Title: TD (X) Change () Addition Name: CHANDLER, BRYAN Name: CHANDLER, BRYAN

Address: 10 N PINEHURST DR Address: 10 N PINEHURST DR City-St-Zip: TUSCALOOSA, AL 35401 City-St-Zip: TUSCALOOSA, AL 35401

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: LEW DICKSON PD 04/07/2009

Electronic Signature of Signing Officer or Director

Date