

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006904

FILED
Apr 11, 2008
Secretary of State

Entity Name: VINEYARD AT RAVEN OAKS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550

New Principal Place of Business:

10221 EMERALD COAST PKWY, W
STE 23
MIRAMAR BEACH, FL 32550

Current Mailing Address:

New Mailing Address:

FEI Number: 03-0393100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMERALD COAST ASSOCIATION MGT. INC
10221 EMERALD COAST PKWY, W
STE 23
MIRAMAR BEACH, FL 32550 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: PD () Delete
Name: LAFFERTY, BEVERLY
Address: 2529 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

Title: VPD () Delete
Name: LAUTERBACH, DICK
Address: 2518 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

Title: DT () Delete
Name: BERGSTROM, CARL
Address: 2533 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

Title: DS () Delete
Name: LANDWEHR, BARBARA
Address: 2515 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

Title: D () Delete
Name: REDA, SAM
Address: 2535 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

Title: D () Delete
Name: LANGE, TONY
Address: 2517 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BERGSTROM, CARL
Address: 2533 VINEYARD LANE
City-St-Zip: SANDESTIN, FL 32550

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

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: BEVERLY LAFFERTY

PD

04/11/2008

Electronic Signature of Signing Officer or Director

Date