

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 15, 2009
Secretary of State

DOCUMENT# N02000001820

Entity Name: GULF CREST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8715 SURF DRIVE
PANAMA CITY BEACH, FL 32408**New Principal Place of Business:****Current Mailing Address:**8715 SURF DRIVE
PANAMA CITY BEACH, FL 32408**New Mailing Address:****FEI Number:** 06-1681373**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILLIAMS, JACK G
502 HARMON AVE.
PANAMA CITY, FL 32402 US**Name and Address of New Registered Agent:**DUNLAP & SHIPMAN, P.A.
1414 CO. HWY. 283 SOUTH, SUITE B
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: DAVID H. MILAM

05/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DIPIETRO, JOE
Address: P.O. BOX 19758
City-St-Zip: PANAMA CITY BEACH, FL 32417

Title: P () Delete
Name: RICHARD, WATSON
Address: 6385 TRUDY DRIVE
City-St-Zip: FLOWERY BRANCH, GA 30542

Title: T () Delete
Name: SCOBEE, DAVID
Address: 2645 CLUBSIDE TERRACE
City-St-Zip: ALPHARETTA, GA 30022

Title: S () Delete
Name: DOEPKE, FRED
Address: 8715 SURF DRIVE #2001
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D () Delete
Name: GREENE, STAN
Address: 903 WIMBLEDON ROAD
City-St-Zip: MACON, GA 31210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () 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: COURTNEY HARRIS

MGR

05/15/2009

Electronic Signature of Signing Officer or Director

Date