

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005877

FILED
Jul 17, 2006
Secretary of State

Entity Name: BLUE MOUNTAIN BEACH INDUSTRIAL PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

909 MAR WALT DR STE 1014
FT WALTON BCH, FL 32547

New Principal Place of Business:

Current Mailing Address:

909 MAR WALT DR STE 1014
FT WALTON BCH, FL 32547

New Mailing Address:

FEI Number: 01-0787269 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCINNIS, C. JEFFREY
909 MAR WALT DR STE 1014
FT WALTON BCH, FL 32547 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: D () Delete
Name: MCCORMICK, SCOTT
Address: 320 KILLARNEY RD
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: WEST, CHARLES
Address: 30 COUNTRY CLUB RD
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: RIGGS, BARRY F M.D.
Address: 4724 SERENDIPITY POINTE
City-St-Zip: DESTIN, FL 32541

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:

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: W. SCOTT MCCORMICK

D

07/17/2006

Electronic Signature of Signing Officer or Director

Date