


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90099 031 ****61.25

DOCUMENT # N02000006555		
1. Entity Name ROLLIN TIDE VILLAS CONDOMINIUM OWNERS ASSOCIATION, INC.		

Principal Place of Business 180 CULLMAN AVE. SANTA ROSA BEACH, FL 32459 US	Mailing Address 82 SUGAR SANDS LANE #A-13 SANTA ROSA BEACH, FL 32459
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60011594



2. Principal Place of Business - No P.O. Box # 82 Sugar Sands Ln		3. Mailing Address	
Suite, Apt. #, etc. # A-13		Suite, Apt. #, etc.	
City & State Santa Rosa Beach, FL		City & State	
Zip 32459	Country USA	Zip	Country

02012007 Chg-NP CR2E037 (12/06)

4. FEI Number 56-2300314	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent TARVER, LOYD 180 CULLMAN AVE. SANTA ROSA BEACH, FL 32459	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS, GARETH 1565 BLOCKFORD COURT EAST TALLAHASSEE, FL 32317 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARREN, MARISSA L 120 BRAXTON LANE WEST HENDERSONVILLE, TN 37075 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, CAROLE 603 PEBBLE CREEK LANE ENTERPRISE, AL 36330 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ASHDOWN, GORDON 1 WARDBROOK ST, POUNDBURY DORCHESTER, DORSE UK DT13GQ, <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYDICK, WILLIAM 396 PAGE DR MOUNT JULIET, TN 37122 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WIGGINS, J B 49 HINTON DR #2 SANTA ROSA BEACH, FL 32459 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Matt West 565 Tahoma Dr. Atlanta GA 30350 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: Loyd Tarver Loyd Tarver **2/1/07** **See addendum**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

60011594

ADDENDUM TO

2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N02000006555

ROLLIN TIDE VILLAS CONDOMINIUM OWNERS' ASSOCIATION, INC.

10. CONTINUED

Director Addition

Title:	Director
Name:	Blanche Dame
Street Address:	5500 Rock Bluff, N.E.
City - St - Zip:	Comstock Park, MI 49321

SIGNATURE

Loyd Tarver, Loyd Tarver 2/1/07