2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006575

FILED Apr 26, 2009 Secretary of State

Entity Name: BEACH HAVEN COTTAGES OWNERS ASSOCIATION, INC.

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

5311 E. CO HIGHWAY 30-A 5311 E. CO HIGHWAY 30-A

STE 5 STE 3

SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

P.O. BOX 4703 5311 E. CO HIGHWAY 30-A

SANTA ROSA BEACH, FL 32459 STE 3 SANTA ROSA BEACH, FL 32459

FEI Number: 20-1043881 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:

PRITCHETT, WALTER R 5311 E CO HWY 30A

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete MANNING, RICHARD H MANNING, RICHARD H Name: Name: 1306 RIDGEWAY AVENUE Address: 1306 RIDGEWAY AVENUE Address: City-St-Zip: NEW ALBANY, IN 47150 City-St-Zip: NEW ALBANY, IN 47150

Title: () Delete Title: (X) Change () Addition MCKINNEY-SMITH, WEEKS Name: MCKINNEY-SMITH, WEEKS Name: Address: 167 CRESENT AVENUE Address: 167 CRESENT AVENUE City-St-Zip: LOUISVILLE, KY 40206 City-St-Zip: LOUISVILLE, KY 40206

Title: DV() Delete Title: DIT (X) Change () Addition

ROACHE, TOM ROACHE, TOM Name: Name: 38 LEONARD STREET Address: 66 RUE DE SOLEIL Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: PORTLAND, ME 04103

Title: DΡ () Delete Title: () Change () Addition

Name: HOFFMAN, JOEL Name: 42586 WIMBLETON WAY Address: Address: City-St-Zip: NOVI, MI 48377 City-St-Zip:

Title: Dν () Delete Title: (X) Change () Addition

KELLY, TERRY Name: Name: BRYAN, JANET

86 HILLTOP DR 5674 HUMMINGBIRD RD Address: Address: SANTA ROSA BEACH, FL 32459 BASCOM, FL 32423 City-St-Zip: 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: WALTER R PRITCHETT RA04/26/2009