2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009612

FILED Jan 20, 2006 Secretary of State

Entity Name: BAYOU LANDINGS HOMEOWNERS ASSOCIATION, INC.

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

10221 EMERALD COAST PARKWAY WESTQ SUITE 23

MIRAMAR BEACH, FL 32550

New Mailing Address: Current Mailing Address:

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

FEI Number Applied For () FEI Number: 51-0483313 FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GELDER, JAY B 10221 EMERALD COAST PARKWAY WEST SUITE 23 MIRAMAR BEACH, FL 32550 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete DP (X) Change () Addition LILIENTHAL, DAVID WILDE, KEN Name: Name:

7 CAMP DAVID Address: 155 BAYOU LANDING ROAD Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DTS () Delete Title: () Change () Addition

MARTIN, KATHY Name: Name: Address: 132 BAYOU LANDING RD. Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip:

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

BASHAM, RICK REED, ELS Name: Name:

884 EAST HWY 98 Address: Address: 20 BAYOU LANDING ROAD City-St-Zip: DESTIN, FL 32541 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Name: WILDE, KEN Name: 155 BAYOU LANDING RD. Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip:

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

SANANTONIO, MICHELLE Name: Name: 105 BAYOU LANDING RD. Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 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: KEN WILDE PD 01/20/2006