

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003139

FILED  
Apr 05, 2012  
Secretary of State

**Entity Name:** ST. JAMES BAY PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

160 LAUGHING GULL LN  
CARRABELLE, FL 32322

**New Principal Place of Business:**

**Current Mailing Address:**

160 LAUGHING GULL LN  
CARRABELLE, FL 32322

**New Mailing Address:**

**FEI Number:** 16-1660680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEWIS, STEVE  
125 S GADSDEN ST, STE 300  
TALLAHASSEE, FL 32301 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:** VD  
**Name:** RHEEL, DAVID  
**Address:** 160 LAUGHING GULL LN  
**City-St-Zip:** CARRABELLE, FL 32322 US

**Title:** CD  
**Name:** CLARK, EDDIE  
**Address:** 8340 MEADOW RD SUITE 226  
**City-St-Zip:** DALLAS, TX 75231 US

**Title:** S  
**Name:** COOPER, LYNNE  
**Address:** 160 LAUGHING GULL LN  
**City-St-Zip:** CARRABELLE, FL 32322

**Title:** PD  
**Name:** KLEIN, ROBERT  
**Address:** 160 LAUGHING GULL LN  
**City-St-Zip:** CARRABELLE, FL 32322

I hereby 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 all other like empowered.

**SIGNATURE:** LYNNE COOPER

S

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date