2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004290

FILED Feb 12, 2009 Secretary of State

Entity Name: MAGNOLIA BAY AT SANDESTIN HOMEOWNERS ASSOCIATION, INC.

Our Circi	incipal Place o	or business:	New Principal Plac	e of Dusiliess.
12273 US F	-WY 98			
STE 208	22550			
DESTIN, FI	L 32330			
Current Ma	ailing Address	:	New Mailing Addre	ess:
12273 US F	-IWY 98			
STE 208				
DESTIN, FL	L 3255U			
FEI Number:	59-3669512	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:
STARNES,	JIM		LEIRER, WALT	
12273 US F			12273 US HWY 98	
STE 208	. 22552 110		STE 208	LIO.
DESTIN, FL	L 32550 US		DESTIN, FL 32550	05
-	named entity su	bmits this statement for the	purpose of changing its register	red office or registered agent, or both,
in the State				02/12/2009
in the State	of Florida. RE: <u>WALT LEI</u> F		ent	02/12/2009 Date
in the State SIGNATUR	of Florida. RE: <u>WALT LEI</u> F	RER c Signature of Registered Ag		
in the State SIGNATUR OFFICERS	of Florida. RE: WALT LEIF Electronic AND DIRECT	RER c Signature of Registered Ag		Date
in the State SIGNATUR OFFICERS Title: Name:	of Florida. RE: WALT LEIF Electronic AND DIRECT ST () E LUCKING, CYNTI	RER c Signature of Registered Ag ORS: Delete HIA	ADDITIONS/CHANG Title: Name:	Date GES TO OFFICERS AND DIRECTORS
in the State SIGNATUR OFFICERS Title: Name: Address:	of Florida. RE: WALT LEIF Electronic AND DIRECT ST () E LUCKING, CYNTI 2932 PINE VALLE	RER c Signature of Registered Ag ORS: Delete HIA EY	ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS
in the State SIGNATUR OFFICERS Title: Name: Address:	of Florida. RE: WALT LEIF Electronic AND DIRECT ST () E LUCKING, CYNTI	RER c Signature of Registered Ag ORS: Delete HIA EY	ADDITIONS/CHANG Title: Name:	Date GES TO OFFICERS AND DIRECTORS
in the State SIGNATUR OFFICERS Title: Name: Address: City-St-Zip:	RE: WALT LEIF Electronic AND DIRECT ST () E LUCKING, CYNTI 2932 PINE VALLI MIRAMAR BEACE	RER c Signature of Registered Ag ORS: Delete HIA EY	ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS
in the State SIGNATUR OFFICERS Title: Name: Address: City-St-Zip: Title:	RE: WALT LEIF Electronic AND DIRECT ST () E LUCKING, CYNTI 2932 PINE VALLI MIRAMAR BEACE	RER c Signature of Registered Ag ORS: Delete HIA EY H, FL 32550	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTORS () Change () Addition
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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: LES NICHOLS CAM 02/12/2009