

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004587

FILED
Mar 26, 2009
Secretary of State

Entity Name: PARK POINT AT SECLUDED DUNES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

224 7TH ST
PORT SAINT JOE, FL 32456 US

New Principal Place of Business:

2827 JOAN AVE.
SUITE B
PANAMA CITY BEACH, FL 32408 US

Current Mailing Address:

224 7TH ST
PORT SAINT JOE, FL 32456 US

New Mailing Address:

2827 JOAN AVE.
SUITE B
PANAMA CITY BEACH, FL 32408 US

FEI Number: 90-0238128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, THOMAS S
116 SAILORS COVE DRIVE
PORT ST. JOE, FL 32456 US

Name and Address of New Registered Agent:

CHARLES, COSTIN A
413 WILLIAMS AVE.
PORT ST. JOE, FL 32456 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: CHARLES A. COSTIN

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PARSONS, ROBERT M
Address: 531 NEWNAN ST. SUITE #3
City-St-Zip: CARROLLTON, GA 30117 US

Title: DV () Delete
Name: MAGRIN, JUD
Address: 3280 SELF MOUNTAIN EAST
City-St-Zip: BLAIRSVILLE, GA 30512 US

Title: DST () Delete
Name: TALLMAN, ALEXANDER J
Address: 2035 BRICKTON STATION
City-St-Zip: BUFORD, GA 30518 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: MAGRIN, JUD
Address: 3280 SELF MOUNTAIN EAST
City-St-Zip: BLAIRSVILLE, GA 30512 US

Title: () Change () Addition
Name:
Address:
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: BARBARA A. BURG

CAM

03/26/2009

Electronic Signature of Signing Officer or Director

Date