2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005256

FILED Feb 09, 2009 Secretary of State

Entity Name: LAUREL GROVE HOMEOWNERS ASSOCIATION, INC.

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

9300 EMERALD COAST PKWY. 1300 LAUREL GROVE

MIRAMAR BEACH, FL 32550 MIRAMAR BEACH, FL 32550

Current Mailing Address: New Mailing Address:

P.O. BOX 6627 PO BOX 6627

MIRAMAR BEACH, FL 32550 MIRAMAR BEACH, FL 32550

FEI Number: 13-4259134 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:

RYLESS, BRANDI SOUTHERN ASSOCIATION MANAGEMENT

9300 EMERALD COAST PKWY
MIRAMAR BEACH, FL 32550 US

34894 EMERALD COAST PKWY
DESTIN, FL 32541 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: JEFF CRESSE 02/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change() Addition

 Name:
 SHORT, KAY
 Name:

 Address:
 1277 LAUREL WAY
 Address:

 City-St-Zip:
 MIRAMAR BEACH, FL 32550
 City-St-Zip:

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

 Name:
 DANETTE, BEAN
 Name:
 DANETTE, BEAN

 Address:
 205 BUCANEAR DRIVE
 Address:
 205 BUCCANEER DRIVE

 City-St-Zip:
 HATTIESBURG, MS 39402
 City-St-Zip:
 HATTIESBURG, MS 39402

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

 Name:
 MCCOOK, TERI
 Name:
 MCCOOK, TERI

 Address:
 451 BAYTON RD.
 Address:
 451 BOYTON RD.

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 MAITLAND, FL 32751

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: JEFF CRESSE CAM 02/09/2009