2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006230

FILED Apr 25, 2006 Secretary of State

Entity Name: OWNERS' ASSOCIATION OF THE RESERVATION, INC.

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

1609 E. SHOTWELL STREET 209 7TH STREET

BAINBRIDGE, GA 39817 PORT ST. JOE, FL 32456

Current Mailing Address: New Mailing Address:

P. O. BOX 928 209 7TH STREET

BAINBRIDGE, GA 39818 PORT ST. JOE, FL 32456

FEI Number: 90-0222537 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:

GIBSON, THOMAS S
206 E. 4TH STREET
PORT ST. JOE, FL 32456 US
GIBSON, THOMAS S
116 SAILORS COVE DRIVE
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: 04/25/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ()Delete Title: DP (X)Change ()Addition

Name: WADDELL, GREG Name: VICKERS, JENNIE
Address: 1609 E. SHOTWELL STREET Address: 209 7TH STREET

City-St-Zip: BAINBRIDGE, GA 39817 City-St-Zip: PORT ST. JOE, FL 32456

Title: D () Delete Title: DV (X) Change () Addition Name: HARRELL, MARK Name: DAKE, JIM

Address: 1609 E. SHOTWELL STREET Address: 209 7TH STREET

City-St-Zip: BAINBRIDGE, GA 39817 City-St-Zip: PORT ST. JOE, FL 32456

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

 Name:
 CONDER, MIKE
 Name:
 PARKER, TERRI

 Address:
 1609 E. SHOTWELL STREET
 Address:
 209 7TH STREET

 City-St-Zip:
 BAINBRIDGE, GA 39817
 City-St-Zip:
 PORT ST. JOE, FL 32456

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: JENNIE VICKERS DP 04/25/2006