

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2008  
Secretary of State**

DOCUMENT# N03000006230

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

**Current Principal Place of Business:**

224 7TH STREET  
PORT ST. JOE, FL 32456

**New Principal Place of Business:**

**Current Mailing Address:**

224 7TH STREET  
PORT ST. JOE, FL 32456

**New Mailing Address:**

FEI Number: 90-0222537      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:**

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:            DP            ( ) Delete  
Name:            VICKERS, JENNIE  
Address:        428 EAST BEACH DRIVE  
City-St-Zip:    PANAMA CITY, FL 32401 US

Title:            DV            ( ) Delete  
Name:            DAKE, JIM  
Address:        2407 JENKS AVENUE  
City-St-Zip:    PANAMA CITY, FL 32405 US

Title:            DST           ( ) Delete  
Name:            DUFFY, LOUISE  
Address:        2416 HYDE MANOR DRIVE  
City-St-Zip:    ATLANTA, GA 30327 US

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

Title:            DP            (X) Change ( ) Addition  
Name:            DUFFY, LOUISE  
Address:        2416 HYDE MANOR DR  
City-St-Zip:    ATLANTA, GA 30327 US

Title:            DV            (X) Change ( ) Addition  
Name:            MOLDOVAN, VICTOR  
Address:        5180 DEERLAKE DRIVE  
City-St-Zip:    ALPHARETTA, GA 30005 US

Title:            DST           (X) Change ( ) Addition  
Name:            DAKE, JIM  
Address:        2407 JENKS AVENUE  
City-St-Zip:    PANAMA CITY, FL 32405 US

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: LOUISE DUFFY

DP

04/18/2008

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

\_\_\_\_\_  
Date