2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000518

FILED Apr 01, 2008 Secretary of State

Entity Name: THE GATES AT STERLING COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2104 STERLING COVE BLVD PANAMA CITY BEACH, FL 32408 **Current Mailing Address: New Mailing Address:** C/O BURG MANAGEMENT COMPANY 2827 JOAN AVE, SUITE B PANAMA CITY BEACH, FL 32408 FEI Number: 20-1831417 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: WILLIAMS, JACK G 502 HARMON AVENUE US PANAMA CITY, FL 32401 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition WINTON, CALVIN FISHER, SCOTT Name: Name: 2180 STERLING COVE BLVD Address: 2175 STERLING COVE BLVD Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: DV () Delete Title: (X) Change () Addition FISHER, SCOTT Name: MURPHY, PATRICK Name: Address: 2175 STERLING COVE BLVD Address: 2133 STERLING COVE BLVD City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: () Delete Title: () Change () Addition VITALE, DIANE Name: Name: 1685 ROSS COURT Address: Address: City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: Title: DS Title: () Change () Addition () Delete Name: DUNLAP, RON Name: 2126 STERLING COVE BLVD Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: Title: () Delete Title: (X) Change () Addition VIRGA, JOEY NICHOLS, GREG Name: Name: 2124 STERLING COVE BLVD 3090 JONQUIL DRIVE Address: Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip: SMYRNA, GA 30080

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 MGR. 04/01/2008