2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# N04000000822

Entity Name: THE PRESERVE AT GRAYTON BEACH OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7 TOWN CENTER LOOP
SUITE C16
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1247
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 47-0937968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHIPMAN, GARY A ESQ
1414 CO. HWY. 283 SOUTH
SUITE B
SANTA ROSA BEACH, FL 32459 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: PD ( ) Delete
Name: HOOKS, JAN
Address: 8 COLEMAN DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DV ( ) Delete
Name: RUSHING, SUSAN
Address: 220 STATE HIGHWAY 83
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: STD ( ) Delete
Name: NEGRON, RICHARD
Address: 5218 TEALING DRIVE
City-St-Zip: ROSWELL, GA 30075

Title: D ( ) Delete
Name: RAU, RICHARD
Address: 4045 W. COUNTY HIGHWAY 30 A #403
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D ( ) Delete
Name: HOGG, ED
Address: 101 BREE LANE
City-St-Zip: CANTON, GA 30114

Title: D ( ) Delete
Name: JONES, ANDREW
Address: 3068 H.D. ATHA ROAD
City-St-Zip: COVINGTON, GA 30014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: GARY A. SHIPMAN RA 03/16/2009

Electronic Signature of Signing Officer or Director — Date