

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 14, 2007
Secretary of State

DOCUMENT# N04000002667

Entity Name: CELADON BEACH OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**17757 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32413**New Principal Place of Business:****Current Mailing Address:**17757 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32413**New Mailing Address:****FEI Number:** 65-1220971**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SLOAN, TIMOTHY J
427 MCKENZIE AVENUE
PANAMA CITY, FL 32401 US**Name and Address of New Registered Agent:**WILLIAMS, JACK G
502 HARMON AVENUE
PANAMA CITY, FL 32401 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: JACK G. WILLIAMS

11/14/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SIEGEL, ROY
Address: 120 PROVIDENCE LK PT
City-St-Zip: ALPHARETTA, GA 30004

Title: AS () Delete
Name: FORD, KEVIN
Address: P.O. BOX 550229
City-St-Zip: ATLANTA, GA 30355

Title: P () Delete
Name: RETHERFORD, KRIS
Address: 109 GROVE ISLE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: T () Delete
Name: SANFORD, DICKY
Address: P.O. BOX 767638
City-St-Zip: ROSWELL, GA 30076

Title: S () Delete
Name: GAMRON, LYNN
Address: 3 HAMPER COURT
City-St-Zip: TROPHY CLUB, TX 76262

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:

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: KEVIN FORD

AS

11/14/2007

Electronic Signature of Signing Officer or Director

Date