

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006477

FILED
Mar 28, 2007
Secretary of State

Entity Name: OLD BAY VILLAGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

988 AIRPORT ROAD
DESTIN, FL 32541

New Principal Place of Business:

4400 HIGHWAY 20 E
SUITE 313
NICEVILLE, FL 32578

Current Mailing Address:

988 AIRPORT ROAD
DESTIN, FL 32541

New Mailing Address:

P.O. BOX 5263
NICEVILLE, FL 32578

FEI Number: 20-2061054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONEZZI, ROBERT A
988 AIRPORT ROAD
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

LANDSBERGER, DARLANE
4400 HIGHWAY 20 E
SUITE 313
NICEVILLE, FL 32578 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: DARLANE LANDSBERGER

03/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BONEZZI, ROBERT A
Address: 988 AIRPORT ROAD
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: GRAHAM, JILL R
Address: 988 AIRPORT ROAD
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: WILLINGHAM, MICHELLE
Address: 988 AIRPORT ROAD
City-St-Zip: DESTIN, FL 32541

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RICH, LAURA
Address: 243 MATTIE KELLY BLVD
City-St-Zip: DESTIN, FL 32541

Title: VD (X) Change () Addition
Name: PETERSON, BRIAN
Address: 205 MATTIE KELLY BLVD
City-St-Zip: DESTIN, FL 32541

Title: SD (X) Change () Addition
Name: ROSE, STEPHEN
Address: 306 HOLLY STREET
City-St-Zip: DESTIN, FL 32541

Title: TD () Change (X) Addition
Name: TALBERT, DAVE
Address: 804 KELLAIRE DRIVE
City-St-Zip: DESTIN, FL 32541

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: LAURA RICH

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date