

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007489

FILED
Jul 10, 2009
Secretary of State

Entity Name: SAND CLIFFS ON THE GULF HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

169 WALTON BUENA VISTA
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

169 WALTON BUENA VISTA
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 20-1521228 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GOLDBERG, KENNETH D ESQ.
1725 MAHAN DR., STE. 201
TALLAHASSEE, FL 32308 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOWGUL, JAMES
Address: 35 WALTON BONITA DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VD () Delete
Name: DALTON, PAMELA
Address: 296 SAND CLIFFS DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: SD () Delete
Name: MCCLENNY, WALTER
Address: 151 WALTON BUENA VISTA DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: TD () Delete
Name: HALL, ARTHUR
Address: 169 WALTON BUENA VISTA DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413

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:

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: ARTHUR M. HALL

MR.

07/10/2009

Electronic Signature of Signing Officer or Director

Date