## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008408

225 MAIN STREET, #6

DESTIN, FL 32541

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Entity Name: DALTON PLACE AT SEAGROVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 12273 US HWY 98 300 EASTERN LAKE RD SANTA ROSA, FL 32459 204A DESTIN, FL 32550 **New Mailing Address: Current Mailing Address:** 12273 US HWY 98 300 EASTERN LAKE RD 204A SANTA ROSA, FL 32459 DESTIN, FL 32550 FEI Number: 20-1692603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SEACOAST ASSO MGT INC DECKER, MICHAEL C/O WALT LEIRER 300 EASTERN LAKE RD. 12273 US HWY 98 SUITE 204A US SANTA ROSA, FL 32459 DESTIN, FL 32550 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: MICHAEL DECKER 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WHISENHUNT, PHILLIP Name: Name: 4700 S BOWMAN RD, STE 700 Address: Address: City-St-Zip: LITTLE ROCK, AR 72210 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DECKER, MICHAEL Name: DECKER, MICHAEL Name: Address: 778 SCENIC GULF DR. A101 Address: 7700 EASTERN AVE. UNIT 304 City-St-Zip: DESTIN, FL 32550 City-St-Zip: DALLAS, TX 75209 Title: () Delete Title: (X) Change ( ) Addition BARENONSKI, JOSEPH BARENONSKI, JOSEPH Name: Name: 600 E LAS COLLINAS, STE 222 Address: Address: 778 SCENIC GULF DR, A101 City-St-Zip: IRVING, TX 75039 City-St-Zip: MIRAMAR BEACH, FL 32550 Title: (X) Delete Title: () Change () Addition Name: LEIRER, WALT Name:

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.

Address:

City-St-Zip:

SIGNATURE: MICHAEL DECKER P 04/28/2009