## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009527

**Current Principal Place of Business:** 

4039 E. CO. HWY 30-A

FILED Apr 22, 2007 Secretary of State

**New Principal Place of Business:** 

5311 E. CO. HWY 30-A

Entity Name: CORAL BAY VILLAGE AT DOWNING STREET OWNERS' ASSOCIATION, INC.

SEAGROVE BEACH, FL 32459 STE 5 SANTA ROSA BEACH, FL 32459 **Current Mailing Address: New Mailing Address:** 5311 E. CO. HWY 30-A 4039 E. CO. HWY 30-A STE 5 SEAGROVE BEACH, FL 32459 SANTA ROSA BEACH, FL 32459 FEI Number: 20-1736694 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PERRY, AMY A PRITCHETT, WALTER R 4477 LÉGENDARY DRIVE 5311 E. CO. HWY 30-A SUITE 202 STE 5 DESTIN, FL 32541 US SANTA ROSA BEACH, FL 32459 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: WALTER R PRITCHETT 04/22/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SHEPPARD, ALLEN R JR Name: Name: 5304 SUNSET AVE Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: Title: VD () Delete Title: () Change () Addition SHEPPARD, KAREN Name: Name: Address: 5304 SUNSET AVE Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip: Title: STD () Delete Title: () Change () Addition SMITH, WILLIAM H Name: Name: 4039 E. CO. HWY 30-A Address: Address: City-St-Zip: SEAGROVE BEACH, FL 32459 City-St-Zip:

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: WALTER R PRITCHETT MGR 04/22/2007