

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009527

FILED  
Apr 27, 2008  
Secretary of State

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

**Current Principal Place of Business:**

5311 E. CO. HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

5311 E. CO. HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 20-1736694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRITCHETT, WALTER R  
5311 E. CO. HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459 US

**Name and Address of New Registered Agent:**

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: SHEPPARD, ALLEN R JR  
Address: 5304 SUNSET AVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VD ( ) Delete  
Name: SHEPPARD, KAREN  
Address: 5304 SUNSET AVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: STD ( ) Delete  
Name: SMITH, WILLIAM H  
Address: 4039 E. CO. HWY 30-A  
City-St-Zip: SEAGROVE BEACH, FL 32459

**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:

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: WALTER R PRITCHETT

MGR

04/27/2008

Electronic Signature of Signing Officer or Director

Date