## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000011377

Aug 13, 2009 Secretary of State

Entity Name: MAGNOLIA PLANTATION ON ST. ANDREWS BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4105 COBALT CIRCLE

PANAMA CITY BEACH, FL 32408

Current Mailing Address: New Mailing Address:

4105 COBALT CIRCLE

PANAMA CITY BEACH, FL 32408

FEI Number: 26-0370205 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:

REA, WILLIAM J JR HESS, BRIAN D

100 SOUTH BRIDGE LANE 9108 FRONT BEACH ROAD

C213 BOX 613266 PANAMA CITY BEACH, FL 32407 US WATERSOUND BEACH, FL 32431 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: BRIAN D.HESS 08/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

Name: REA, WILLIAM J JR Name:

 Address:
 2002 SUMMIT BLVD., SUITE 1000
 Address:

 City-St-Zip:
 ATLANTA, GA 30319
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SIEBERT, SEAN
 Name:

 Address:
 101 ARNAU COURT
 Address:

 City-St-Zip:
 ST. AUGUSTINE, FL 32095
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 CRAMER, RICK
 Name:

 Address:
 34 BETHANY BAY
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 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: WILLIAM J. REA, JR P 08/13/2009