

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04104

FILED
Apr 20, 2009
Secretary of State

Entity Name: LULLWATER BEACH CONDOMINIUM HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

301 LULLWATER DR.
PANAMA CITY BEACH, FL 324132451

New Principal Place of Business:

Current Mailing Address:

301 LULLWATER DR.
PANAMA CITY BEACH, FL 324132451

New Mailing Address:

FEI Number: 59-2507671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HESS, GLENN L.
9108 FRONT BEACH RD
PANAMA CITY, FL 32408 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: SD () Delete
Name: DYE, KATHARINE
Address: 113 SAN SOUCI
City-St-Zip: PANAMA CITY, FL 32413

Title: D () Delete
Name: TWITTY, MIKE
Address: 2017 SANFORD DRIVE
City-St-Zip: MOUNT JULIET, TN 37122

Title: D () Delete
Name: PHILLIP, JAMES
Address: 219 N. STATE ST
City-St-Zip: GENOA, IL 60135

Title: D () Delete
Name: PEYTON, ROGER
Address: 671 EAST ARCH
City-St-Zip: MADISONVILLE, KY 42437

Title: D () Delete
Name: GREANY, JO S
Address: 2770 PINE RIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32308

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:

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: KATHARINE DYE

TREA

04/20/2009

Electronic Signature of Signing Officer or Director

Date