

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001647

FILED  
Jan 22, 2009  
Secretary of State

**Entity Name:** OCEAN PLANTATION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

209 7TH STREET  
PORT ST. JOE, FL 32456

**New Principal Place of Business:**

**Current Mailing Address:**

209 7TH STREET  
PORT ST. JOE, FL 32456

**New Mailing Address:**

**FEI Number:** 20-2058881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GULF COAST PROPERTY SERVICES, LLC  
209 7TH STREET  
PORT ST. JOE, FL 32456 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: D ( ) Delete  
Name: CHILDS, RON  
Address: 1709 TWIN LAKES DRIVE  
City-St-Zip: BAINBRIDGE, GA 39818

Title: D ( ) Delete  
Name: NEWMAN, GEORGE S JR  
Address: P. O. BOX 501  
City-St-Zip: PORT ST. JOE, FL 32457

Title: D ( ) Delete  
Name: MCDONALD, JEFF  
Address: 1057 BOYD ROAD  
City-St-Zip: DAYTON, GA 30721

**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: S. NOVAK

CAM

01/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date