2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001688

FILED Jaņ 26, 2<u>00</u>7 Secretary of State

Entity Name: BY THE SEA COMMUNITY OWNERS ASSOCIATION, INC.

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

4481 LEGENDARY DRIVE, SUITE 100 4481 LEGENDARY DRIVE DESTIN, FL 32541

SUITE 100

DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

4481 LEGENDARY DRIVE, SUITE 100 P.O. BOX 1414

DESTIN, FL 32541 CRESTVIEW, FL 32536

FEI Number: 20-2680389 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:

CAMPBELL, JAMES S C/O BEGGS & LANE, RLLP MCCANN, RONALD W 1328 N. FÉRDON BLVD. 501 COMMENDENCÍA STREET STE. 321

PENSACOLA, FL 32502 US CRESTVIEW, FL 32536 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: RONALD W. MCCANN 01/26/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

WIEBRAND, JENNIFER MARLOW, MARK Name: Name: 4481 LEGENDARY DRIVE, SUITE 100 Address: 4481 LEGENDARY DRIVE, SUITE 100 Address:

DESTIN, FL 32541 DESTIN, FL 32541

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: FLOWERS, RICHMOND M III Name: FAULKNER, MIKE Address: 4481 LEGENDARY DRIVE, SUITE 100 Address: 4481 LEGENDARY DRIVE, SUITE 100

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: VSD () Delete Title: STD (X) Change () Addition

COZEAN, R. WALTER Name: VALEKIS, VASIL Name: 4481 LEGENDARY DRIVE, SUITE 100 4481 LEGENDARY DRIVE, SUITE 100 Address: Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

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: RONALD W. MCCANN RΑ 01/26/2007