

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003989

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: PARADISE MOORINGS HOMEOWNER'S ASSOCIATION, INC.

## Current Principal Place of Business:

5455 A1A SOUTH  
ST. AUGUSTINE, FL 32080

## New Principal Place of Business:

475 WEST TOWN PLACE  
SUITE 112  
ST. AUGUSTINE, FL 32092

## Current Mailing Address:

5455 A1A SOUTH  
ST. AUGUSTINE, FL 32080

## New Mailing Address:

5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080

FEI Number: 20-4645547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC.  
5455 A1A SOUTH  
ST. AUGUSTINE, FL 32080 US

## Name and Address of New Registered Agent:

MAY MANAGEMENT SERVICES, INC.  
5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080 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: ANNA MARKS

04/09/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HARTLEY, RANDY  
Address: 1838 MOORINGS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP ( ) Delete  
Name: CHRISTENSEN, DENNIS K  
Address: 1892 MOORINGS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: T ( ) Delete  
Name: EMMERICH, WILLIAM S  
Address: 1861 PARADISE MOORINGS BLVD.  
City-St-Zip: MIDDLEBURG, FL 32068

Title: S ( ) Delete  
Name: TITTENHOFER, JULIE  
Address: 1815 MOORINGS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D ( ) Delete  
Name: HARTING, DONALD W  
Address: 1823 MOORINGS CIRCLE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CHRISTENSEN, DENNIS  
Address: 5455 A1A SOUTH, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP (X) Change ( ) Addition  
Name: HARTING, DON  
Address: 5455 A1A SOUTH, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T (X) Change ( ) Addition  
Name: CRISSINGER, SAMMUEL  
Address: 5455 A1A SOUTH, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S (X) Change ( ) Addition  
Name: MORKEN, GREG  
Address: 5455 A1A SOUT, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D (X) Change ( ) Addition  
Name: BUCK, RUSSELL  
Address: 5455 A1A SOUTH, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D ( ) Change (X) Addition  
Name: SPEAR, RALPH  
Address: 5455 A1A SOUTH, SUITE 3  
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: DENNIS CHRISTENSEN

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date