

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 07, 2008
Secretary of State

DOCUMENT# N05000005051

Entity Name: OVATION ON CAPE SAN BLAS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1440 DUTCH VALLEY PLACE SUITE 100
ATLANTA, GA 30324**New Principal Place of Business:****Current Mailing Address:**1440 DUTCH VALLEY PLACE SUITE 100
ATLANTA, GA 30324**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HANSON, RICK
1440 DUTCH VALLEY PLACE
SUITE 100
ATLANTA, FL 30324 US**Name and Address of New Registered Agent:**HARRISON, WILLIAM
101 HARRISON AVENUE
PANAMA CITY, FL 32401 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: WILLIAM HARRISON

07/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, JACK
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: V () Delete
Name: HANSON, RICK
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: S () Delete
Name: LEFFARD, DAVID
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: T () Delete
Name: WILLIAMS, JACK K
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANSON, RICK
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: V (X) Change () Addition
Name: LEFFARD, DAVID
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: S (X) Change () Addition
Name: HOHULIN, ANGIE
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

Title: T (X) Change () Addition
Name: BURGIN, NORMA JEAN
Address: 1440 DUTCH VALLEY PLACE SUITE 100
City-St-Zip: ATLANTA, GA 30324

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: DAVID LEFFARD

V

07/07/2008

Electronic Signature of Signing Officer or Director

Date