2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006020

FILED Apr 25, 2007 Secretary of State

Entity Name: EAST BAY PLANTATION OF BAY COUNTY HOMEOWNERS ASSOCIATION, INC.

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

209 7TH STREET 224 7TH STREET

PORT ST JOE, FL 32456 PORT ST JOE, FL 32456

Current Mailing Address: New Mailing Address:

209 7TH STREET 224 7TH STREET

PORT ST JOE, FL 32456 PORT ST JOE, FL 32456

FEI Number: 20-4202437 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:

GROOM, PAUL W II 116 SAILORS COVE DR PORT ST JOE, FL 32456 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:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

 Title:
 DST
 () Delete
 Title:
 DP
 (X) Ch

 Name:
 RISH, RALPH P
 Name:
 JONES, PATRICK

 Address:
 450 BLAKE DR
 Address:
 711 WOODWARD AVENUE

 City-St-Zip:
 WEWAHITCHKA, FL 32465
 City-St-Zip:
 PORT ST. JOE, FL 32456

Title: DP () Delete Title: DV (X) Change () Addition Name: RISH, WILLIAM J JR Name: RISH, WILLIAM J JR

Address: 214 GAUTIER MEMORIAL LANE Address: 214 GAUTIER MEMORIAL LANE
City-St-Zip: PORT ST JOE, FL 32456 City-St-Zip: PORT ST JOE, FL 32456

 $\label{eq:title:DV} \mbox{Title:} \mbox{ DV } \mbox{ () Delete} \mbox{ Title:} \mbox{ D } \mbox{ (X) Change () Addition}$

 Name:
 FAISON, GREGORY B
 Name:
 ROBERTS, GREG

 Address:
 433 BUNKERS COVE RD
 Address:
 224 7TH STREET

 City-St-Zip:
 PANAMA CITY, FL 32401
 City-St-Zip:
 PORT ST. JOE, FL 32456

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: PATRICK JONES P 04/25/2007