

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008728

FILED
Apr 28, 2009
Secretary of State

Entity Name: TROPIC WINDS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

502 HARMON AVE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 609
HIXSON, TN 37343

New Mailing Address:

FEI Number: 20-4124637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JACK G
502 HARMON AVE
PANAMA CITY, FL 32401 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: HARBOUR, CB III
Address: 4513 HIXSON PIKE SUITE 108
City-St-Zip: CHATTANOOGA, TN 37343

Title: D () Delete
Name: WILLIAMS, BETTY
Address: 17643 FRONT BEACH ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D () Delete
Name: CHANDLER, ROBERT
Address: 243 SIGNAL MTN ROAD, SUITE M
City-St-Zip: CHATTANOOGA, TN 37405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARBOUR, CB III
Address: 502 HARMON AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: D (X) Change () Addition
Name: ROBERTS, PEGGY
Address: 243 SIGNAL MTN ROAD, STE M
City-St-Zip: CHATTANOOGA, TN 37405

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: C.B. HARBOUR, III

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date