

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009118

FILED
Apr 23, 2007
Secretary of State

Entity Name: VILLAS AT SUNCREST CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

427 MCKENZIE AVENUE
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

427 MCKENZIE AVENUE
PANAMA CITY, FL 32401 US

New Mailing Address:

FEI Number: 00-5425377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARMON, DANIEL III
427 MCKENZIE AVENUE
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: P () Delete
Name: JOHNSON, DOUGLAS
Address: 713 SEMINOLE RIDGE
City-St-Zip: MELROSE, FL 32666 US

Title: S/T () Delete
Name: WHELCHER, WARD
Address: 9724 KINGSTON PIKE, SUITE 206
City-St-Zip: KNOXVILLE, TN 37922 US

Title: D () Delete
Name: DIONAS, MIKE
Address: 9724 KINGSTON PIKE STE 206
City-St-Zip: KNOXVILLE, TN 37922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: JOHNSON, DOUGLAS
Address: 427 MCKENZIE AVENUE
City-St-Zip: PANAMA CITY, FL 32401 US

Title: S/T (X) Change () Addition
Name: COX, RAY
Address: 427 MCKENZIE AVENUE
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D (X) Change () Addition
Name: ROCKER, JOHN
Address: 427 MCKENZIE AVENUE
City-St-Zip: PANAMA CITY, FL 32401

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: RAY COX

S/T

04/23/2007

Electronic Signature of Signing Officer or Director

Date