2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2009
Secretary of State

DOCUMENT# N05000010731

Entity Name: FRIENDS OF THE GRAND LAGOON, INC.

Current Principal Place of Business:

7207 LAGOON DRIVE
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

7207 LAGOON DRIVE
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 20-3246584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BANKS, LYN
7107 LAGOON DR
PANAMA CITY, FL 32408 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: T ( ) Delete
Name: MILLSAP, LINDA
Address: 7111 LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: ROSE, KEVIN
Address: 7905 NORTH LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: DAVIS, AL
Address: 6726 SOUTH LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: BEAVER, KERMIT
Address: 6311 PALM COURT
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: COUCH, RANDY
Address: 6918 SOUTH LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: GENTRY, WAYNE
Address: 7510 SOUTH LAGOON DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LINDA MILLSAP TREA 01/17/2009
Electronic Signature of Signing Officer or Director — Date