

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002742

FILED
Feb 18, 2009
Secretary of State

Entity Name: MEXICO BEACH CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

504 MARYLAND BLVD.
MEXICO BEACH, FL 32456 US

New Principal Place of Business:

404 NEW MEXICO DRIVE
MEXICO BEACH, FL 32456 US

Current Mailing Address:

PO BOX 13217
MEXICO BEACH, FL 32410 US

New Mailing Address:

FEI Number: 06-1772706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISINGER, CONNIE E MS.
504 MARYLAND BLVD
MEXICO BEACH, FL 32456 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: RISINGER, CONNIE E MS.
Address: 504 MARYLAND BLVD.
City-St-Zip: MEXICO BEACH, FL 32456 US

Title: VP () Delete
Name: MATHIS, JANE H MS.
Address: 201 4TH STREET
City-St-Zip: MEXICO BEACH, FL 32456 US

Title: TRS () Delete
Name: LAWTON, MICHAEL T MR.
Address: 119 4TH STREET
City-St-Zip: MEXICO BEACH, FL 32456 US

Title: SEC () Delete
Name: OSTMAN, NANCY MS.
Address: 404 NEW MEXICO DRIVE
City-St-Zip: MEXICO BEACH, FL 32456 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OSTMAN, DAN MR.
Address: 404 NEW MEXICO DRIVE
City-St-Zip: MEXICO BEACH, FL 32456 US

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: JANE H MATHIS

VP

02/18/2009

Electronic Signature of Signing Officer or Director

Date