

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005707

FILED
Feb 25, 2009
Secretary of State

Entity Name: CLUBSIDE AT WILD HERON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1110 PROSPECT PROMINADE
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

PO BOX 6297
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 20-4952581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, ZACH
36132 EMERALD COAST PKWY
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

JOHNSON, ZACH
11714 EMERALD COAST PKWY
MIRAMAR BEACH, FL 32550 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: ZACH JOHNSON

02/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BATEMAN, ARTHUR L
Address: PO BOX 12169
City-St-Zip: NAPLES, FL 34101

Title: D () Delete
Name: DERSCH, JOYCE
Address: PO BOX 12169
City-St-Zip: NAPLES, FL 34101

Title: D (X) Delete
Name: DULANEY, JO ANN
Address: PO BOX 12169
City-St-Zip: NAPLES, FL 34101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NORTHCUTT, MARK
Address: 16 HIGH DUNE DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Change () Addition
Name: ELLIS, MARY
Address: 2126 WILD HERON WAY, #104
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: MARK NORTHCUTT

D

02/25/2009

Electronic Signature of Signing Officer or Director

Date