

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009159

FILED
Jan 29, 2008
Secretary of State

Entity Name: LAKESIDE AT BLUE MOUNTAIN BEACH OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1732 WEST COUNTY HIGHWAY 30-A
SUITE 105
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

1732 WEST COUNTY HIGHWAY 30-A
SUITE 105
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-3353160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, DANA C
MATTHEWS & HAWKINS, P.A.
4475 LEGENDARY DRIVE
DESTIN, FL 32541 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: MCCORMICK, MICHAEL W
Address: 1732 WEST COUNTY HIGHWAY 30-A, SUITE 105
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: CRUM, G.BARTON
Address: 641 S LAWRENCE STREET
City-St-Zip: MONTGOMERY, AL 36104

Title: D () Delete
Name: ELLIS, MATTHEW T
Address: 641 S LAWRENCE STREET
City-St-Zip: MONTGOMERY, AL 36104

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOLDBERG, KEN
Address: 5114 CHINABERRY LANE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: COLEMAN, WILLIAM
Address: 1012 UNION CENTER DRIVE
City-St-Zip: ALPHARETTA, GA 30004

Title: D (X) Change () Addition
Name: MCLAURIN, DAVID
Address: 1414 E. CONSTITUTION PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Change (X) Addition
Name: LAMON, CLARENCE D
Address: 81 MATT'S WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: RITA RAUS

MGR.

01/29/2008

Electronic Signature of Signing Officer or Director

Date