

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002590

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** THE PRESERVE AT SEAGROVE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5365 E. CO. HIGHWAY 30A  
SUITE 107  
SEAGROVE BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

5365 E. CO. HIGHWAY 30A  
SUITE 107  
SEAGROVE BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRANKLIN H. WATSON, P.A.  
5365 E. CO. HIGHWAY 30A  
SUITE 105  
SEAGROVE BEACH, FL 32459 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: BEAUCHAMP, KRYSTAL S  
Address: 5365 E. CO. HIGHWAY 30A, SUITE 107  
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: D ( ) Delete  
Name: MILES, KEVIN  
Address: P.O. BOX 9070  
City-St-Zip: PANAMA CITY, FL 32417

Title: D ( ) Delete  
Name: TUCKER, JEFFREY S  
Address: 255 EAST PACES FERRY ROAD SUITE 450  
City-St-Zip: ATLANTA, GA 30305

**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:

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: KRYSTAL BEAUCHAMP

DIR

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date