2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N07000002718

Entity Name: EMERALD GRANDE WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10 HARBOR BLVD
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

10 HARBOR BLVD
DESTIN, FL 32541

New Mailing Address:

FEI Number: 20-8686036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEGLER, MITCHELL W
300A WHARFSIDE WAY
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LEGLER, MITCHELL W
50 NORTH LAURA STREET
2900
JACKSONVILLE, FL 32202 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: _____ 04/27/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CRAUL, BRUCE
Address: 42 TERRA COTTAWAY
City-St-Zip: DESTIN, FL 32541

Title: VD ( ) Delete
Name: BUSFIELD, DAVE
Address: 8825 ST ANDREWS DR
City-St-Zip: DESTIN, FL 32541

Title: STD ( ) Delete
Name: PARKER, WENDY
Address: 358 SAILFISH DR
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete
Name: LITTLE, SCOTT
Address: 438 ADMIRAL CT
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete
Name: DUR, PHILLIP
Address: 3518 MONTGOMERY LANE
City-St-Zip: PASCAGOULA, MS 39587

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: CRAUL, BRUCE
Address: 42 TERRA COTTAWAY
City-St-Zip: DESTIN, FL 32541

Title: V,D (X) Change ( ) Addition
Name: BUSFIELD, DAVE
Address: 8825 ST ANDREWS DR
City-St-Zip: DESTIN, FL 32541

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

Title: D (X) Change ( ) Addition
Name: BOSSERMAN, JAMES
Address: 2701 SCENIC HIGHWAY 98 2
City-St-Zip: DESTIN, FL 32541

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: WENDY PARKER S 04/27/2009
Electronic Signature of Signing Officer or Director — Date