2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010037

FILED Apr 25, 2008 Secretary of State

Entity Name: SANCTUARY BY THE SEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4507 FURLING LANE SUITE 108 1363 W. COUNTY HWY. 30A DESTIN, FL 32541 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

4507 FURLING LANE SUITE 108
DESTIN, FL 32541
414 N. CAUSEWAY BLVD.
SUITE A
MANDEVILLE, LA 70448

FEI Number: 26-1274394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BECKER, LARRY P SR

4507 FURLING LANE SUITE 108

DESTIN, FL 32541 US

MATTHEWS, DANA C

MATTHEWS & HAWKINS, P.A.

4475 LEGENDARY DRIVE

DESTIN, FL 32541 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: DANA C. MATTHEWS 04/25/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BECKER, LARRY P SR Name: BETHEA, WILLIAM C

Address: 4507 FURLING LANE SUITE 108 Address: 414 N. CAUSEWAY BLVD., STE. A

City-St-Zip: DESTIN, FL 32541 City-St-Zip: MANDEVILLE, LA 70448

Title: VD () Delete Title: VD (X) Change () Addition Name: BECKER, LARRY JR Name: HOWARD, DAVID L

 Address:
 4507 FURLING LANE SUITE 108
 Address:
 P.O. BOX 1007

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 SHELBYVILLE, TN 37162

Title: VD () Delete Title: STD (X) Change () Addition Name: MCCORMICK, MICHAEL W Name: NEWELL, CHARLES D JR

Address: 1732 W CTY HWY 30-A SUITE 105 Address: 25 COLLEGE PARK City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: JACKSON, TN 38302

Title: STD (X) Delete Title: () Change () Addition

 Name:
 BURGESS, JIMMY
 Name:

 Address:
 4070 CTY HWY 280A
 Address:

 City-St-Zip:
 DEFUNIAK SPRINGS, FL 32435
 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: WILLIAM C. BETHEA PD 04/25/2008