2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# N07230

Entity Name: COSTA DEL SOL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1987 SCENIC GULF DRIVE
B-8
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

C/O JAY GELDER
10221 EMERALD COAST PKWY, W, S23
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-2777328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ECAM
10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550 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:	TOMASEK, DANIEL J	
Address:	1987 SCENIC GULF DR., # B-8	
City-St-Zip:	MIRAMAR BEACH, FL 32550	
Title:	D	( ) Delete
Name:	GRIFFITH, JAMES	
Address:	900 WESTERN AVENUE	
City-St-Zip:	HAMMOND, LA 70401	
Title:	ST	( ) Delete
Name:	SMART, BURT	
Address:	P.O. BOX 51114	
City-St-Zip:	LAFAYETTE, LA 70505	
Title:	D	( ) Delete
Name:	HALL, DARIUS	
Address:	32476 DUNN RD.	
City-St-Zip:	DENHAM SPRINGS, LA 70726	
Title:	DP	( ) Delete
Name:	THOMAS, DANIEL	
Address:	109 JAMES DRIVE	
City-St-Zip:	HOPKINSVILLE, KY 42240	
Title:	DVP	( ) Delete
Name:	MORRIS, AL	
Address:	133 KNOTTS LANDING DR.	
City-St-Zip:	WOODSTOCK, GA 30188	

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:	
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: DAN THOMAS PD 04/25/2008

Electronic Signature of Signing Officer or Director — Date