2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07539

FILED Mar 23, 2009 Secretary of State

Entity Name: BEACHCREST CONDOMINIUM OWNERS' ASSOCIATION, INC.

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

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

3768 E. C-30A 3768 E. C- 30A

SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 US

FEI Number: 65-0095340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HALL, JULIE A 3768 E C-30 A EDWARDS, JULIE A

3768 E C-30 A

SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 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: JULIE A. EDWARDS 03/23/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

WHEELER, RONALD R MOYERS, JAMES R Name: Name: 157 S. ROCK ISLAND DR. NE Address: 1607 TYNE BLVD Address: City-St-Zip: EATONTON, GA 31024 City-St-Zip: NASHVILLE, TN 37215

Title: S/TD () Delete Title: () Change () Addition

BROWN, LYTLE III Name: Name: Address: P.O.BOX 40841 Address: City-St-Zip: NASHVILLE, TN 37204 City-St-Zip:

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

GRAY, J.L. GRAY, J.L. Name: Name:

4468 PINEHURST CIRCLE 4468 PINEHURST CIRCLE Address: Address: City-St-Zip: MARIETTA, GA 30067 City-St-Zip: MARIETTA, GA 30067

Title: () Delete Title: () Change () Addition

Name: CARRERA, MARIE Name: Address: 2299 ECHO CLIFF CT Address: City-St-Zip: ATLANTA, GA 30345 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

NAPIER, ROBERT Name: Name: 210 SCOTLAND PLACE Address: Address: City-St-Zip: NASHVILLE, TN 37205 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: JL GRAY PD 03/23/2009