


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90246 039 ****61.25

DOCUMENT # N07697			
1. Entity Name RAMSGATE HARBOUR OWNERS ASSOCIATION, INC.			
Principal Place of Business 23011 FRONT BCH RD PANAMA CITY BEACH, FL 32413		Mailing Address 23011 FRONT BCH RD PANAMA CITY BEACH, FL 32413	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02092006		Chg-NP CR2E037 (11/05)	
4. FEI Number 59-2585206		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HESS, BRIAN 9108 FRONT BEACH RD PANAMA CITY BCH., FL 32408		Name Street Address (P O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D <input type="checkbox"/> Delete NAME: MACDONALD, WILLIAM STREET ADDRESS: 227 BLUEGRASS DR. CITY-ST-ZIP: HENDERSONVILLE, TN 37075		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	
TITLE: TD <input type="checkbox"/> Delete NAME: PAXTON, JAMES R STREET ADDRESS: 38 POZCHASE DR CITY-ST-ZIP: DOTHAN, AL 36305		TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: 9 Holly Hill Rd STREET ADDRESS: Dothan AL CITY-ST-ZIP: 36305	
TITLE: PD <input type="checkbox"/> Delete NAME: EDSON, RONALD A. STREET ADDRESS: 317 FAIR OAKS CR CITY-ST-ZIP: MARTINEZ, GA 30907		TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: PO Box 98 STREET ADDRESS: Grovertown, GA CITY-ST-ZIP: 30913	
TITLE: D <input checked="" type="checkbox"/> Delete NAME: MOFXETT, MARTHA STREET ADDRESS: 280 NOLAND PIKE CITY-ST-ZIP: SIMPSONVILLE, KY 40067		TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME: Dennis Revell STREET ADDRESS: 345 Idylwood Dr CITY-ST-ZIP: Athens, GA 30605	
TITLE: D <input checked="" type="checkbox"/> Delete NAME: PARKER-MILLER, BETHANY STREET ADDRESS: 5715 GREEN ISLAND DR. CITY-ST-ZIP: COLUMBUS, GA 31904		TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME: Sid Basore STREET ADDRESS: 1853 Sturbridge Dr CITY-ST-ZIP: Lancaster PA 17601	
TITLE: VPD <input type="checkbox"/> Delete NAME: PEPPENHORST, BILL STREET ADDRESS: 168 FAIROAKS ST CITY-ST-ZIP: GADSDEN, AL 35901		TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: 1408 Badham Dr STREET ADDRESS: Birmingham, AL CITY-ST-ZIP: 35216	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Ronald A. Edson</u>		RONALD A. EDSON Date: 02/18/06 Page: 829 466 2	