

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09072

FILED
Jan 15, 2009
Secretary of State

Entity Name: NAVARRE BEACH LEASEHOLDERS AND RESIDENTS ASSOCIATION INC.

Current Principal Place of Business:

PO BOX 5003
NAVARRE BCH, FL 325667227

New Principal Place of Business:

10 ROYAL PALM
ROYAL PALM, FL 32569

Current Mailing Address:

PO BOX 5003
NAVARRE BCH, FL 32566 US

New Mailing Address:

FEI Number: 59-2501906 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SWEENEY, WAYNE
8520 CULF BLVD #40
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

COLEY, ROBERT
8271 GULF BLVD
NAVARRE, FL 32566 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: ROBERT COLEY

01/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: VEAL, ANGEIA
Address: 10 ROYAL PALM
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: TAYLOR, JAMES R
Address: 7640 KEY WEST DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: SD () Delete
Name: AGEE, Nanci
Address: 790 S. WHITE SANDS BLVD #5
City-St-Zip: NAVARRE BEACH, FL 32566

Title: PD () Delete
Name: SWEENEY, WAYNE
Address: 8520 GULF BLVD #40
City-St-Zip: NAVARRE, FL 32566

Title: VD () Delete
Name: PARAVATE, LOUIS
Address: 7591 WHITE SANDS
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SWEENEY, WAYNE
Address: 8520 GULF BLVD
City-St-Zip: NAVARRE, FL 32566

Title: SD (X) Change () Addition
Name: RICHARDSON, JOHN
Address: 7721 WHITE SANDS BLVD
City-St-Zip: NAVARRE BEACH, FL 32566

Title: PD (X) Change () Addition
Name: COLEY, ROBERT
Address: 8271 GULF BLVD
City-St-Zip: NAVARRE, FL 32566

Title: VD (X) Change () Addition
Name: TAYLOR, JAMES
Address: 7640 KEY WEST DR
City-St-Zip: NAVARRE, FL 32566

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: ANGELA R. VEAL

TD

01/15/2009

Electronic Signature of Signing Officer or Director

Date