

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11139

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** BEACHFRONT II OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

145 BEACHFRONT TRAIL  
SANTA ROSA BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

5311 E. CO HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459 US

**New Mailing Address:**

**FEI Number:** 59-2590754      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PRITCHETT, WALTER R  
5311 E. CO HWY 30-A  
STE 5  
SANTA ROSA BEACH, FL 32459 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: DST ( ) Delete  
Name: TOPPING, NANCY  
Address: 2862 HOLLYWOOD DRIVE  
City-St-Zip: DECATUR, GA 30033

Title: D ( ) Delete  
Name: WRIGHT, PATTY  
Address: PO BOX 87  
City-St-Zip: FALLS OF ROUGH, KY 40119

Title: DP ( ) Delete  
Name: SADD, LUCRESIA  
Address: 441 KITE ROAD  
City-St-Zip: SWAINSBORO, GA 30401

Title: D ( ) Delete  
Name: ZIMMER, CAROLE  
Address: 90 MILLSTREAM ROAD  
City-St-Zip: AMSTON, CT 06231

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D P (X) Change ( ) Addition  
Name: TOPPING, NANCY  
Address: 2862 HOLLYWOOD DRIVE  
City-St-Zip: DECATUR, GA 30033

Title: D S (X) Change ( ) Addition  
Name: WRIGHT, PATTY  
Address: PO BOX 87  
City-St-Zip: FALLS OF ROUGH, KY 40119

Title: D (X) Change ( ) Addition  
Name: PALEY, MIKE  
Address: 2221 JUNCTION ROAD  
City-St-Zip: FALLS OF ROUGH, KY 40119

Title: D V (X) Change ( ) Addition  
Name: OPPENHEIM, ANNILIESE  
Address: 3900 ROYAL OAKS COURT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D T ( ) Change (X) Addition  
Name: SHARP, JOANNE  
Address: 5122 EDGEWATER DR  
City-St-Zip: SAVAGE, MN 55378

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: WALTER R PRITCHETT

MGR

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date