2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N11512

Entity Name: SEASCAPE NUMBER SEVEN ASSOCIATION, INC.

Current Principal Place of Business:

910 AIRPORT RD. SUITE A-5
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1666
DESTIN, FL 32540 US

New Mailing Address:

FEI Number: 59-2534211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, WAVERLY
910 AIRPORT RD. SUITE A5
DESTIN, FL 32541 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: ST ( ) Delete
Name: MEES, JAN
Address: 3456 SPALDING DRIVE
City-St-Zip: DUNWOODY, GA 30350

Title: VP ( ) Delete
Name: DOLLARHIDE, BILL
Address: 2840 BELLE CHRISTIAN CIRCLE
City-St-Zip: PENSACOLA, FL 32503

Title: P ( ) Delete
Name: WARREN, CONNER
Address: 2118 HICKORY RIDGE CIRCLE
City-St-Zip: BIRMINGHAM, AL 35243

Title: D ( ) Delete
Name: PADGETT, RONALD
Address: 351 AVALON BLVD
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D ( ) Delete
Name: STOKES, JERRY
Address: 120 OAK POINTE
City-St-Zip: BOWLING GREEN, KY 42103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KENDALL, WILLIAM
Address: 4940 LAVISTA ROAD
City-St-Zip: TUCKER, GA 30084

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: ST (X) Change ( ) Addition
Name: STOKES, JERRY
Address: 120 OAK POINTE
City-St-Zip: BOWLING GREEN, KY 42103

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: CONNER WARREN PRES 04/29/2009
Electronic Signature of Signing Officer or Director — Date