

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11737

FILED
Jan 11, 2009
Secretary of State

Entity Name: THE RAMSEY BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVID BARNHART
345 MAI KAI DR
PENSACOLA, FL 32526 US

New Principal Place of Business:

JOHN F. SCHLEICH
3492 MAI KAI DR
PENSACOLA, FL 32526 US

Current Mailing Address:

C/O JOHN F. SCHLEICH
3492 MAI KAI DR.
PENSACOLA, FL 32526 US

New Mailing Address:

JOHN F. SCHLEICH
3492 MAI KAI DR
PENSACOLA, FL 32526 US

FEI Number: 59-2659606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANCELLOR, SANDRA
3451 MAI KAI DR
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

SCHLEICH, JOHN F TREAS.
3492 MAI KAI DR.
PENSACOLA, FL 32526 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: JOHN F. SCHLEICH

01/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHANCELLOR, SANDRA
Address: 3451 MAI KAI DR
City-St-Zip: PENSACOLA, FL 32526

Title: VPD (X) Delete
Name: DANIELS, WAYNE
Address: 3465 MAIKAI DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: TD (X) Delete
Name: SCHLEICH, JOHN F
Address: 3492 MAI KAI DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: SD (X) Delete
Name: SCLEASE, CINDY
Address: 3472 MAI KAI DRIVE
City-St-Zip: PENSACOLA, FL 32526

Title: AMD (X) Delete
Name: MCLEOD, BRUCE P
Address: 5643 BAY FOREST DRIVE
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: SCHLEICH, JOHN F TREAS
Address: 3492 MAI KAI DR.
City-St-Zip: PENSACOLA, FL 32526 US

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: () Change () Addition
Name:
Address:
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: JOHN F. SCHLEICH

TREA

01/11/2009

Electronic Signature of Signing Officer or Director

Date