

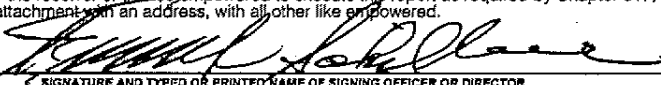


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # N18646							
1. Entity Name PROMENADE OFFICEOWNERS' AND STOREOWNERS' ASSOCIATION, INC.							
Principal Place of Business 8317 FRONT BEACH RD SUITE 9 PANAMA CITY BEACH, FL 32407	Mailing Address 8317 FRONT BEACH RD SUITE 9 PANAMA CITY BEACH, FL 32407						
DO NOT WRITE IN THIS SPACE		01182007 No Chg-NP CR2E037 (4/06)					
		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 80%; padding: 2px;">4. FEI Number 59-2887197</td><td style="width: 20%; padding: 2px;">Applied For <input type="checkbox"/> Not Applicable</td></tr><tr><td colspan="2" style="padding: 2px;">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 59-2887197	Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent HUTCHINSON, EDWARD A JR ESQ 221 MCKENZIE AVENUE PANAMA CITY, FL 32401		DO NOT WRITE IN THIS SPACE					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____							
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS		U000000616322 02/07/07-80052-021 61.25					
TITLE	PD	DO NOT WRITE IN THIS SPACE					
NAME	SCHILLECI, FRANK S						
STREET ADDRESS	1700 EMORY FOLMAR INDUST BLVD						
CITY - ST - ZIP	MONTGOMERY, AL 36110						
TITLE	SD						
NAME	SCHILLECI, MARK						
STREET ADDRESS	13623 FRONT BEACH ROAD						
CITY - ST - ZIP	PANAMA CITY BCH, FL 32413	DO NOT WRITE IN THIS SPACE					
TITLE	D						
NAME	SCHILLECI, MINDELYN						
STREET ADDRESS	13623 FRONT BEACH ROAD						
CITY - ST - ZIP	PANAMA CITY BCH, FL 32413						
TITLE							
NAME							
STREET ADDRESS							
CITY - ST - ZIP							
TITLE							
NAME							
STREET ADDRESS							
CITY - ST - ZIP							
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: 		1/23/07					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>				