2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# N20585

Entity Name: EAST PASS TOWERS MARINA ASSOCIATION, INC.

Current Principal Place of Business:

100 GULFSHORE DRIVE
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 882
DESTIN, FL 32540 US

New Mailing Address:

FEI Number: 59-2816674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRATT, LINDA A
225 MAIN STREET
STE 9
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:	P	( ) Delete
Name:	MITCHELL, PETER	
Address:	3020 SHAMROCK NORTH	
City-St-Zip:	TALLAHASSEE, FL 32308	
Title:	ST	( ) Delete
Name:	PARRIS, SAM	
Address:	8685 N. SHORE DRIVE	
City-St-Zip:	JONESBORO, GA 30236	
Title:	D	( ) Delete
Name:	MOULTON, RICHARD	
Address:	3119 HIGHWAY 2	
City-St-Zip:	LAUREL HILL, FL 32567	
Title:	D	( ) Delete
Name:	LEWIS, WAYNE	
Address:	100 GULFSHORE DR #606 NORTH	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	GONZALES, ROBERT	
Address:	110 GULFSHORE DR #105	
City-St-Zip:	DESTIN, FL 32541	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	
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: PETER MITCHELL D 04/21/2008
Electronic Signature of Signing Officer or Director — Date