

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20585

FILED
Apr 29, 2009
Secretary of State

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:

BONNEAU, DONNA L
613 MAYFLOWER AVENUE
FORT WALTON BEACH, FL 32547 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: DONNA L BONNEAU

04/29/2009

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

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date