2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46940

Entity Name: SEASIDE TOWN COUNCIL, INC.

FILED Jan 09, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

PO BOX 4957

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

PO BOX 4957

SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-3105801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCFARLAND, CONNIE HOLL BUILDING HIGHWAY 30-A SANTA ROSA BEACH, FL 32549 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition HAMMES, DAVID HAMMES, DAVID Name: Name: Address:

1219 WINDMILL DRIVE Address: 1219 WINDMILL DRIVE City-St-Zip: MERIDIAN, MS 39305 City-St-Zip: MERIDIAN, MS 39305

Title: () Delete Title: () Change () Addition Name: SCRUGGS, DAVID Name:

Address: 81 MONROE AVENUE Address: City-St-Zip: MEMPHIS, TN 38103 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

BUEHLER, FRED Name: MESTRE, DEBI Name: 1401 JOHNSON FERRY RD Address: Address: 4830 OLD LEEDS ROAD City-St-Zip: MARIETTA, GA City-St-Zip: BIRMINGHAM, AL 35213

Title: PD () Delete Title: () Change () Addition

Name: NOONAN, BRUCE Name: 3810 PLAZA ST. Address: Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip:

Title: () Delete Title: VD (X) Change () Addition

WEATHERSBY, WOODS WEATHERSBY, WOODS Name: Name: 6520 ROBBINS RIDGE 6520 ROBBINS RIDGE Address: Address: City-St-Zip: MEMPHIS, TN 38119 City-St-Zip: MEMPHIS, TN 38119

Title: () Delete Title: (X) Change () Addition GREEN, HARVEY DAHLGREN, ANN Name: Name:

Address: 7909 FRERET STREET Address: 171 RIVER COURT PARKWAY NEW ORLEANS, LA 70118 City-St-Zip: ATLANTA, GA 30328 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUCE NOONAN **PRES** 01/09/2004