2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# N47696

Entity Name: OLD FLORIDA BEACH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

354 OLD BEACH ROAD
#61
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

354 OLD BEACH ROAD
#21
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

354 OLD BEACH ROAD
#61
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

354 OLD BEACH ROAD
#21
SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-3173083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLATT, MICHELE
240 BUCK RD
SANTA ROSA BEACH, FL 32459 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: PD ( ) Delete
Name: KIESLING, JOHN
Address: 434 ADMIRAL COURT
City-St-Zip: DESTIN, FL 32541

Title: TD ( ) Delete
Name: HAZLETON, SHARON
Address: 42 BOARDWALK LANE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: MC CABE, BRIAN
Address: 512 OLD BEACH ROAD BOX 01
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DS ( ) Change (X) Addition
Name: ANDERSON, BRIAN
Address: 161 OLD BEACH ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON HAZLETON DT 02/07/2007

Electronic Signature of Signing Officer or Director — Date