2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# N47696

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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: STEIN, RICHARD
Address: 405 OLD BEACH ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Title: DS ( ) Delete
Name: ROSS, FRAN
Address: 521 OLD BEACH ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DVP ( ) Delete
Name: ANDERSON, BRIAN
Address: 161 OLD BEACH ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change ( ) Addition
Name: KIESLING, JOHN
Address: 434 ADMIRAL COURT
City-St-Zip: DESTIN, FL 32541

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: SHARON HAZLETON TREA 04/10/2009

Electronic Signature of Signing Officer or Director Date