2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000922

Jan 17, 2005 Secretary of State

Entity Name: THE SEASIDE MERCHANTS' ASSOCIATION, INC.

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

P. O. BOX 4870

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

P. O. BOX 4870

SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-3179282 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:

SIMPLER, PAULER COUNTRY ROAD 30 A COUNTY ROAD 30-A SANTA ROSA BEACH, FL 32459 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 ROY, CARA Name: ROY CARA Name:

P.O. BOX 4870 COUNTY HWY. 30-A Address: P.O. BOX 4870, COUNTY HWY. 30-A Address:

City-St-Zip: SANTA ROSA BEACH, FL City-St-Zip: SANTA ROSA BEACH, FL

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

RICK, SEVERANCE Name: SEVERANCE, RICK Name: Address: P.O. BOX 4870, COUNTY HWY, 30-A Address:

P.O. BOX 4870, COUNTY HWY, 30-A City-St-Zip: SANTA ROSA BEACH, FL

SANTA ROSA BEACH, FL City-St-Zip:

Title: () Delete Title: MR. (X) Change () Addition FLECKENSTEIN, EDD GILBERT, RUSS Name: Name:

Address: PO BOX 4870 HWY 30-A Address: PO BOX 4870, COUNTY HWY 30-A

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Name: BEIGLER, DAVID Name: BIEGLER, DAVID PO BOX 4870 COUNTY HWY 30-A PO BOX 4870, COUNTY HWY 30-A Address: Address:

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

JUDITH, PROCTOR PROCTOR, JUDITH Name: Name:

PO BOX 4872 COUNTRY RAOD PO BOX 4870, COUNTRY HWY 30-A Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

PIERCE, ERICE G PIERCE, ERICA G Name: Name: Address: PO BOX 4870 COUNTY HWY 30-A Address: PO BOX 4870, COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459 City-St-Zip: 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: RUSS GILBERT MR. 01/17/2005