2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# N92000000922

Entity Name: THE SEASIDE MERCHANTS' ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 4870
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 4870
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-3179282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMPLER, PAULER
COUNTRY ROAD 30 A
COUNTY ROAD 30-A
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

SIMPLER, PAULA
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: PAULA SIMPLER 03/04/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: MRS. ( ) Delete
Name: ROY, CARA
Address: P.O. BOX 4870, COUNTY HWY. 30-A
City-St-Zip: SANTA ROSA BEACH, FL

Title: MS ( ) Delete
Name: ABUVALA, CANDACE
Address: POB 4870 CTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MR. ( ) Delete
Name: GILBERT, RUSS
Address: PO BOX 4870, COUNTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MRS ( ) Delete
Name: CONLEY, JAMIE
Address: POB 4870 CTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MR ( ) Delete
Name: CAMPBELL, KELLON
Address: POB 4870 CTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MS ( ) Delete
Name: WEST, EILEEN
Address: POB 4870 CTY HWY 30-A
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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

Title: MR (X) Change ( ) Addition
Name: RAUSCHKOLB, DAVE
Address: POB 4870 CTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MRS (X) Change ( ) Addition
Name: WISE-COBLE, AMY
Address: POB 4870 CTY HWY 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: KRISTIN KRAMIN-BANKER MRS 03/04/2008
Electronic Signature of Signing Officer or Director Date