

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000356

FILED
Jan 26, 2009
Secretary of State

Entity Name: OKALOOSA COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

204 CLOVERDALE BLVD
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2707
FT WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 59-3165895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNNARBORG, PATTI
204 CLOVERDALE BLVD.
FT. WALTON BEACH, FL 32547 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: C () Delete
Name: MCGAUGHY, TAMMY
Address: 45 BEAL PKWY
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TR () Delete
Name: KENT, MIKE
Address: 205 BROOKS ST. SE, SUITE 201
City-St-Zip: FT WALTON BEACH, FL 32548

Title: S () Delete
Name: SMITH, NATE
Address: PO DRAWER 4550
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: CE (X) Delete
Name: MCMORROW, GARY
Address: 604 WEST US 90
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: MCMORROW, GARY
Address: 8 SW HOLLYWOOD BLVD
City-St-Zip: FORT WALTON BEACH, FL 32548

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

Title: S (X) Change () Addition
Name: SMITH, NATE
Address: 646 ANCHORS ST SUITE 8
City-St-Zip: FORT WALTON BEACH, FL 32548

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: PATTI SUNNARBORG

ED

01/26/2009

Electronic Signature of Signing Officer or Director

Date