2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000693

Mar 21, 2009 Secretary of State

Entity Name: THE NORTH GULF COAST CHAPTER OF COMMUNITY ASSOCIATIONS INSTITUTE, INC.

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

927 BLACK CREEK BLVD FREEPORT, FL 32439

Current Mailing Address: New Mailing Address:

P.O. BOX 5013 P O BOX 6952

FORT WALTON BEACH, FL 32549 MIRAMAR BEACH, FL 32550

FEI Number: 59-2137895 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:

OWENS, PATRICIA M 927 BLACK CREEK BLVD FREEPORT, FL 32439

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

GELDER, JAY SHEFFIELD, KATHRYN Name: Name: 10221 EMERALD COAST PKWY Address: OLD SOUTH CENTRE - SUITE 7102 Address:

DESTIN, FL 32541 City-St-Zip: MIRAMAR BEACH, FL 32550 City-St-Zip:

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

BRUENING, WILLIAM WILSON, JACKIE Name: Name: Address: 36474A EMEROLD COAST PKWY Address: P O BOX 13672

City-St-Zip: DESTIN, FL 32541 City-St-Zip: TALLAHASSEE, FL 32317

VΡ Title: () Delete Title: (X) Change () Addition BURG, JEROME GELDER, JAY Name: Name:

10221 EMERALD COAST PKWY W STE 123 Address: PO BOX 5013 Address: City-St-Zip: FORT WALTON BEACH, FL 32549 City-St-Zip: MIRAMAR BEACH, FL 32550

Title: () Delete Title: (X) Change () Addition PERSONS, GLENN Name: HARRIS, HONEY Name:

PO BOX 5013 1627 HOPE CIRCLE Address: Address: City-St-Zip: FT.WALTON BEACH, FL 32549 City-St-Zip: PANAMA CTIY, FL 32407 40

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

WRAY, MIKE BRUENING, WILLIAM Name: Name:

PO BOX 5013 36474A EMERALD COAST PKWY STE 3301 Address: Address: FT.WALTON BEACH, FL 32549

City-St-Zip: City-St-Zip: MIRAMAR BEACH, FL 32550

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

WRAY, MICHAEL Name: Name:

Address: Address: 11212 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32407 City-St-Zip: 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: PATRICIA OWENS REG 03/21/2009