

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001865

FILED
Jan 07, 2008
Secretary of State

Entity Name: C. S. OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3290 SCENIC HWY 98
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:
3290 SCENIC HWY 98
DESTIN, FL 32541 US

New Mailing Address:

FEI Number: 59-3300852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADEN, JAMES J
3290 SCENIC HWY 98
DESTIN, FL 32541 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: P () Delete
Name: ADEN, JAMES J
Address: 8700 RIVER BLUFF LN
City-St-Zip: ROSWELL, GA 30076 US

Title: VP () Delete
Name: DEW, ANTHONY G
Address: 130 NOAHS DRIVE
City-St-Zip: PELL CITY, AL 35128 US

Title: ST () Delete
Name: WEBER, FRANK R
Address: 2222 SLEEPY HOLLOW LN
City-St-Zip: DAYTON, OH 454142964 US

Title: D () Delete
Name: GATES, JAN
Address: 104 WEST FRISCO
City-St-Zip: EUREKA, MO 63025 US

Title: D () Delete
Name: THEOBALD, ADELE
Address: 308 SUMMER TRACE
City-St-Zip: BELLEVILLE, IL 62220 US

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: () 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: JAMES J. ADEN

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date