2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008
Secretary of State

DOCUMENT# N95000002470

Entity Name: MARAVILLA MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2606 SCENIC GULF DRIVE
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

2606 SCENIC GULF DRIVE
DESTIN, FL 32550

New Mailing Address:

FEI Number: 59-3399036 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, LORETTA W
C/O NEWMAN - DAILEY
12815 HWY 98 WEST, STE. 100
DESTIN, FL 32550 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:	D	( ) Delete
Name:	HARRIMAN, GEORGE	
Address:	5817 CRINER RD. SE	
City-St-Zip:	HUNTSVILLE, AL 35802	
Title:	D	( ) Delete
Name:	ROBBINS, MARVIN	
Address:	4246 HARPER FERRY RD.	
City-St-Zip:	BIRMINGHAM, AL 35213	
Title:	P	( ) Delete
Name:	CLAYTON, RENEE	
Address:	76 COUNTRY CLUB DRIVE	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	AYDT, DENNIS	
Address:	224 GRINDSTONE ROAD	
City-St-Zip:	CHATHAM, IL 62707	
Title:	VD	( ) Delete
Name:	MCDANIELS, SHERRY	
Address:	725 GULF SHORE DRIVE #304A	
City-St-Zip:	DESTIN, FL 32541	
Title:	STD	( ) Delete
Name:	KELLEY, JACKIE	
Address:	9032 GREEN CHASE DR	
City-St-Zip:	MONTGOMERY, AL 36117	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	CAPP, MARGARET	
Address:	361 MARAILLA DRIVE	
City-St-Zip:	MIRAMAR BEACH, FL 32550	
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: RENEE CLAYTON PR 02/08/2008

Electronic Signature of Signing Officer or Director — Date