2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003906

Entity Name: LONGUE VUE OWNERS ASSOCIATION, INC.

FILED Apr 19, 2007 Secretary of State

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

5311 E. CO. HWY 30-A 5311 E. CO. HWY 30-A

SANTA ROSA BEACH, FL 32459 STE 5

SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

5311 E COUNTY HWY 30-A 5311 E COUNTY HWY 30-A

STE 5 SANTA ROSA BEACH, FL 32459

SANTA ROSA BEACH, FL 32459

FEI Number: 59-3394970 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:

PRITCHETT, WALTER R PRITCHETT, WALTER R 5311 E. CO. HWY 30 A 5311 E. CO. HWY 30 A

SANTA ROSA BEACH, FL 32459 US STE 5 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: 04/19/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ANSON, NANCY A ANSON, NANCY A Name: Name:

508 AUDOBON WAY Address: 508 AUDOBON DRIVE Address: City-St-Zip: ALBANY, GA 31707 City-St-Zip: ALBANY, GA 31707

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

GLORE, JOHN Name: RABY, GARY Name:

Address: 3064 HICKS RD Address: 5535 SCOTT CREEK DR City-St-Zip: MARIETTA, GA 30060 City-St-Zip: HOOVER, AL 35244

Title: STD () Delete Title: () Change () Addition

WARNER, MATT A Name: Name: Address: 4493 LUKE AVE Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WALTER R PRITCHETT MRG 04/19/2007