

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003886

FILED
Apr 30, 2007
Secretary of State

Entity Name: THE CROSSINGS AT BLUEWATER BAY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1950 BLUEWATER BLVD
200
NICEVILLE, FL 32578 US

New Principal Place of Business:

1940 BLUEWATER BLVD
#11
NICEVILLE, FL 32578 US

Current Mailing Address:

1950 BLUEWATER BLVD
200
NICEVILLE, FL 32578 US

New Mailing Address:

1940 BLUEWATER BLVD
#11
NICEVILLE, FL 32578 US

FEI Number: 59-3664810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, ANN
1950 BLUEWATER BLVD
STE 200
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

HALEY, ANN
1940 BLUEWATER BLVD
#11
NICEVILLE, FL 32578 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:

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: COURTNEY, WENDY
Address: 1474 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: P () Delete
Name: MIDDLETON, JAMES
Address: 1445 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: LEECH, CHARLES
Address: 1438 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: S (X) Delete
Name: GREEN, VICKI
Address: 1443 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Delete
Name: RUTLAND, BOB
Address: 1442 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: MIDDLETON, JAMES
Address: 1445 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: VP/T (X) Change () Addition
Name: LEECH, CHARLES
Address: 1438 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Change () Addition
Name: VERTEFUEILLE, CAROLYN
Address: 1468 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

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 MIDDLETON

P/S

04/30/2007

Electronic Signature of Signing Officer or Director

Date