

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001194

FILED
Feb 28, 2009
Secretary of State

Entity Name: LA VALENCIA BEACH RESORT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

432 LA VALENCIA CIRCLE
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

PO BOX 9768
PANAMA CITY BEACH, FL 32417

New Mailing Address:

FEI Number: 59-3510015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, JACK G
502 HARMON AVE.
PANAMA CITY, FL 32401 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: DAL () Delete
Name: HUDSON, CHAD
Address: P.O. BOX 1121
City-St-Zip: OZARK, AL 36361

Title: T () Delete
Name: BROOKS, LAMAR
Address: 110 HOLLY HILL RD
City-St-Zip: DOTHAN, AL 36305

Title: VP () Delete
Name: DELP, WILLIAM
Address: 4027 BRENTERESA CT
City-St-Zip: SNELLVILLE, GA 30039

Title: D () Delete
Name: DARNELL, FRANKLIN
Address: 2512 MARSTON ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: PS () Delete
Name: BRAGG, STEPHEN
Address: 115 MONTICLAIR CT
City-St-Zip: MACON, GA 31210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRAGG, STEPHEN
Address: 115 MONTICLAIR CT.
City-St-Zip: MACON, GA 31210

Title: VP (X) Change () Addition
Name: DELP, WILLIAM
Address: 4027 BRENTERESA CT
City-St-Zip: SNELLVILLE, GA 30039

Title: S (X) Change () Addition
Name: GIBBS, KAREN
Address: 211 LA VALENCIA CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: T (X) Change () Addition
Name: WHITSITT, RICHARD
Address: 2454 PRETTY BAYOU BLVD
City-St-Zip: PANAMA CITY, FL 32405

Title: D (X) Change () Addition
Name: DARNELL, FRANKLIN
Address: 800 GREENBRIER LANE
City-St-Zip: TALLAHASSEE, FL 32308

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: CHARLIE ALLEN

CAM

02/28/2009

Electronic Signature of Signing Officer or Director

Date