2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007001

FILED Apr 29, 2009 Secretary of State

Certificate of Status Desired (X)

Entity Name: GULF PLACE CABANAS NEIGHBORHOOD OWNERS' ASSOCIATION, INC.

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

145 SPIRES LANE 7 TOWN CENTER LOOP

SANTA ROSA BEACH, FL 32459 US SUITE C16

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1247 P.O. BOX 1247

FEI Number Applied For ()

56 SPIRES LANE, 17A SANTA ROSA BEACH, FL 32459 US

SANTA ROSA BEACH, FL 32459 US

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FEI Number Not Applicable ()

COFFIELD, COLLEEN STENBERG, CYNTHIA

1719 SOUTH COUNTY HWY 393 7 TOWN CENTER LOOP SANTA ROSA BEACH, FL 32459 US SUITE C16

SANTA ROSA BEACH, FL 32439 US SOTTE C16
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: CYNTHIA STENBERG 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

FEI Number: 59-3562431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: PD (X) Change () Addition

 Name:
 MORRI, COULTER
 Name:
 BOOKOUT, PAUL

 Address:
 702 NIM VISTA DR
 Address:
 702 MIRA VISTA DR

 City-St-Zip:
 HUNTSVILLE, AL 35802
 City-St-Zip:
 HUNTSVILLE, AL 35802

Title: VPSD () Delete Title: VPD (X) Change () Addition

 Name:
 NASH, JUDY
 Name:
 NASH, JUDY

 Address:
 12505 KING RD.
 Address:
 12505 KING RD.

 City-St-Zip:
 ROSWELL, GA 30075
 City-St-Zip:
 ROSWELL, GA 30075

 Name:
 POWELL, KEVIN
 Name:
 POWELL, KEVIN

 Address:
 5036 STAVERLY LANE
 Address:
 5036 STAVERLY LANE

 City-St-Zip:
 NORCROSS, GA 30092
 City-St-Zip:
 NORCROSS, GA 30092

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

 Name:
 COULTER, MORRI
 Name:
 EZELL, MIRIAM

 Address:
 702 NIM VISTA DR
 Address:
 506 HIGHLAND DRIVE

 City-St-Zip:
 HUNTSVILLE, AL 35802
 City-St-Zip:
 MADISON, AL 35758

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

 Name:
 Name:
 GUINN, BRUCE

 Address:
 Address:
 3150 BYWATER TRAIL

 City-St-Zip:
 City-St-Zip:
 ROSWELL, GA 30075

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: PAUL BOOKOUT PD 04/29/2009