

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002752

FILED
Apr 28, 2008
Secretary of State

Entity Name: FINISTERRE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5001 NORTH LAGOON DRIVE
PANAMA CITY BEACH, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

15238 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413 US

New Mailing Address:

FEI Number: 59-3528296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, DERRICK
101 HARRISON AVENUE
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: VD () Delete
Name: BENNETT, MICHAEL
Address: 5202 FINISTORRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: SD () Delete
Name: QUAVE, GERALD J
Address: 5214 FINISTERRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: TD () Delete
Name: TURNER, FRED
Address: 5229 FINISTERRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BENNETT, MICHAEL
Address: 5202 FINISTORRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SVENNER, CAMERON
Address: FINISTERRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: PD () Change (X) Addition
Name: DZADEK, BRUCE
Address: FINISTERRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: VD () Change (X) Addition
Name: SHAW, MEREDITH
Address: FINISTERRE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

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: MIKE BENNETT

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date