

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004013

FILED
Jan 20, 2009
Secretary of State

Entity Name: ST. THOMAS AT SILVER SHELLS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

15400 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

15300 EMERALD COAST PARKWAY
DESTIN, FL 32541 US

New Mailing Address:

15000 EMERALD COAST PARKWAY
ASSOCIATION DIVISON
DESTIN, FL 32541 US

FEI Number: 59-3568349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
348 SW MIRACLE STRIP PARKWAY
SUITE 7
FORT WALTON BEACH, FL 32548 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: P () Delete
Name: CARTER, STEVE
Address: 15400 EMERALD COAST PARKWAY, PH 7A
City-St-Zip: DESTIN, FL 32541 US

Title: D () Delete
Name: BASS, PAM
Address: 15400 EMERALD COAST PARKWAY, UNIT 1002
City-St-Zip: DESTIN, FL 32541 US

Title: D () Delete
Name: QUINLAN, JOE
Address: 18020 HARBOUR TOWN COURT
City-St-Zip: BATON ROUGE, LA 70810 US

Title: V () Delete
Name: BOLT, DON
Address: 15400 EMERALD COAST PARKWAY, UNIT 1108
City-St-Zip: DESTIN, FL 32541 US

Title: ST () Delete
Name: BURTS, STEVE
Address: 7464 STANDING BOY ROAD
City-St-Zip: COLUMBUS, GA 31904 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: LA ROCCA, BART
Address: 26 CYCAS STREET
City-St-Zip: BATON ROUGE, LA 70065 US

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: STEVE CARTER

P

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date