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:				New Principal Place of Business:			
	- RALD COA	ST PARKWAY US		Mew Fillic	ipai riace	or Busiliess.	
Current Mailing Address:				New Mailing Address:			
15300 EMERALD COAST PARKWAY DESTIN, FL 32541 US				15000 EMERALD COAST PARKWAY ASSOCIATION DIVISON DESTIN, FL 32541 US			
FEI Number:	59-3568349	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Sta	tus Desired()
Name and	Address of	Current Registered Agent:		Name and	Address o	f New Registered	Agent:
BECKER & POLIAKOFF, P.A. 348 SW MIRACLE STRIP PARKWAY SUITE 7 FORT WALTON BEACH, FL 32548 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,							
in the State		y submits this statement for the pu	10000	r changing it	is registered	a office of registere	d agent, or both,
SIGNATUR							
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CARTER, ST	ALD COAST PARKWAY, PH 7A		Title: Name: Address: City-St-Zip:		() Change () Addition	on
Title: Name: Address: City-St-Zip:	BASS, PAM	() Delete ALD COAST PARKWAY, UNIT 1002 32541 US		Title: Name: Address: City-St-Zip:		() Change () Addition	on
Title: Name: Address: City-St-Zip:	QUINLAN, JO 18020 HARB	() Delete DE OUR TOWN COURT GE, LA 70810 US		Title: Name: Address: City-St-Zip:	D LA ROCCA, 26 CYCAS S BATON ROL		on
Title: Name: Address: City-St-Zip:	BOLT, DON	() Delete ALD COAST PARKWAY, UNIT 1108 32541 US		Title: Name: Address: City-St-Zip:		() Change () Addition	on
Title: Name: Address: City-St-Zip:	BURTS, STE	() Delete VE ING BOY ROAD GA 31904 US		Title: Name: Address: City-St-Zip:		() Change () Addition	on

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