

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004020

FILED
Jan 20, 2009
Secretary of State

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

Current Principal Place of Business:

15100 EMERALD COAST PARKWAY
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

15300 EMERALD COAST PARKWAY
DESTIN, FL 32541

New Mailing Address:

15000 EMERALD COAST PARKWAY
ASSOCIATION DIVISION
DESTIN, FL 32541

FEI Number: 59-3568351

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: PRES () Delete
Name: HAFENDORFER, JIM
Address: 550 O'BYRNE AVENUE
City-St-Zip: LOUISVILLE, KY 40223

Title: S/T () Delete
Name: SCOGGINS, BRONNA
Address: 768 MILL STREAM ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T () Delete
Name: SMITH, HARVEY
Address: 702 MACY DR.
City-St-Zip: ROSWELL, GA 300766332

Title: VP () Delete
Name: SCOTT, VINCE
Address: 11071 PRESERVATION POINT
City-St-Zip: FISHERS, IN 460374148

Title: D () Delete
Name: CHAMBERS, RICHARD
Address: 2 WILBANKS RD.
City-St-Zip: ROME, GA 30161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SCOGGINS, BRONNA
Address: 129 KING SAGO COURT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S/T (X) Change () Addition
Name: PATTEN, IKUKO
Address: 610 GRAND LAKES DRIVE
City-St-Zip: BATON ROUGE, LA 70810

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

Title: D (X) Change () Addition
Name: CHAMBERS, RICHARD
Address: 15100 EMERALD COAST PKWY #305
City-St-Zip: DESTIN, FL 32541

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: JIM HAFENDORFER

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01/20/2009

Electronic Signature of Signing Officer or Director

Date