2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004674

FILED Apr 02, 2009 Secretary of State

Entity Name: SANTA ROSA TOWERS OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 800 FORT PICKENS ROAD **UNIT 102** PENSACOLA BEACH, FL 32561 **New Mailing Address: Current Mailing Address:** 800 FORT PICKENS ROAD **UNIT 102** PENSACOLA BEACH, FL 32561 FEI Number: 59-3531024 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCGRATH, DAN 800 FT. PICKENS ROAD **UNIT 302** PENSACOLA BEACH, FL 32561 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition MCGRATH, DAN Name: Name: 800 FT PICKERS ROAD, #302 Address: Address: City-St-Zip: PENSACOLA BEACH, FL 32561 City-St-Zip: Title: SEC () Delete Title: SEC (X) Change () Addition SHIMEK, TERESA Name: LUMPKIN, WALT Name: Address: 423 NORTH BAYLEN STREET Address: 800 FT PICKENS ROAD UNIT 1604 City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32561 Title: VPD () Delete Title: **VPD** (X) Change () Addition PURCELL, HARRY SINDEL, KAREN Name: Name: 800 FT. PICKENS RD # 1201 14 STAR LAKE DRIVE Address: Address: City-St-Zip: PENSACOLA BEACH, FL 32561 City-St-Zip: PENSACOLA, FL 32507 Title: TREA () Delete Title: () Change () Addition Name: SPROWLS, BOB Name: 800 FT. PICKENS ROAD # 104 Address: Address: City-St-Zip: PENSACOLA BEACH, FL 32561 City-St-Zip: Title: RLG () Delete Title: RLG (X) Change () Addition SINDEL, KAREN Name: Name: KERNAN, CHUCK 800 FT PICKERS ROAD, #1303 800 FT PICKERS ROAD, # 1601 Address: Address: City-St-Zip: PENSACOLA BEACH, FL 32561 City-St-Zip: PENSACOLA BEACH, FL 32561

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: DAN MCGRATH PRES 04/02/2009