## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001163

FILED Jan 29, 2008 Secretary of State

Entity Name: THE PLAZA CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4507- FURLING LN. DESTIN, FL 32541 US **Current Mailing Address: New Mailing Address:** 10221 EMERALD COAST PKWY, W 4507 FURLING LANE THE PLAZA 113 DESTIN, FL 32550 US DESTIN, FL 32541 US FEI Number: 59-3483212 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: GELDER, JAY B COMPASS ASSOCIATION MANAGEMENT C/O EMERALD COAST ASSOC. MGT 4507 FURLING LANE 10221 EMERALD COAST PKWY, W, S23 THE PLAZA 113 MIRAMAR BEACH, FL 32550 US DESTIN, FL 32541 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: SUSAN SANDERS 01/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BECKER, LARRY Name: Name: 529 OLD HICKORY BLVD. Address: Address: City-St-Zip: JACKSON, TN 38303 City-St-Zip: Title: PD () Delete Title: () Change () Addition MCCORD, MAX Name: Name: Address: 662 HARBOR BLVD. #550 Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: VPD () Delete Title: () Change () Addition REDMOND, SONNY Name: Name: 4640 PARADISE ISLE Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: SPENCE, SUZY Name: 340 SCENIC HWY 98 EAST Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: Title: (X) Delete () Change () Addition OLSEN, RODNEY Name: Name: 4507 FURLING LANE #113 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition BOZAK JIM BOZAK, JIM Name: Name: Address: 7588 E. COUNTY ROAD 30-A Address: 39 BAY TRACE RD PANAMA CITY, FL 32413 SANTA ROSA BEACH, FL 32459 City-St-Zip: 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: SUSAN SANDERS CAM 01/29/2008