

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004455

FILED
Jan 20, 2009
Secretary of State

Entity Name: MIRAMAR PLAZA COMMERCIAL CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12889 EMERALD COAST PARKWAY
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

POB 9275
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 59-3598004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COASTAL REALTY OF DESTIN, INC.
4012 COMMONS DR W STE 104E
DESTIN, FL 32541 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: PD () Delete
Name: RULNIK-HINZMAN, WENDY
Address: 98 BARRACUDA ST
City-St-Zip: DESTIN, FL 32541

Title: VPD () Delete
Name: GREER, JIMMIE
Address: 12889 EMERALD COAST PKWY STE S101-A
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: STD () Delete
Name: CAHILL, DEBBIE
Address: 103 WINDSPRAY COURT
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: FISHER, MONTIE
Address: 12889 EMERALD COAST PKW STE 111B
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D () Delete
Name: HENRY, TOMMY
Address: 6910 EAST CTY HWY 30A
City-St-Zip: PROMINENCE, FL 32413

Title: D () Delete
Name: ADAMS, MELINDA
Address: 12889 EMERALD COAST PKWY STE A111
City-St-Zip: MIRAMAR BEACH, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RULNICK-HINZMAN, WENDY
Address: 98 BARRACUDA ST
City-St-Zip: DESTIN, FL 32541

Title: VPD (X) Change () Addition
Name: GREER, JIMMIE
Address: 12889 EMERALD COAST PKWY STE 101A
City-St-Zip: MIRAMAR BEACH, FL 32550

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

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

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: STEPHANIE DICKERSON

MGR

01/20/2009

Electronic Signature of Signing Officer or Director

Date