2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007050

FILED Jan 25, 2005 Secretary of State

Entity Name: FRIENDS OF GRAYTON BEACH STATE RECREATION AREA, INC.

Current Principal Place of Business: New Principal Place of Business: SANTA ROSA BEACH 33 GULF BREEZE DRIVE SANTA ROSA BEACH, FL 32459 **New Mailing Address: Current Mailing Address:** P.O. BOX 1869 SANTA ROSA BEACH, FL 32459 FEI Number: 31-1716757 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: DODD, ANDREW J DODD, ANDREW J 36 SAVELLE DRIVE 168 BUNKER PLACE SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 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: 01/25/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DS () Delete () Change () Addition SOLOMON, MARTHA Name: Name: 10 WHITE SANDS DRIVE Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: DVP Title: () Delete () Change () Addition Name: PERRY, JIM Name: Address: 33 GULF BREEZE DRIVE Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: ΠP () Delete Title: () Change () Addition PATTON, TOM Name: Name: 111 LITTLE REDFISH LANE, #1730 Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32457 City-St-Zip: () Delete Title: DT Title: DT (X) Change () Addition Name: DODD, ANDY Name: DODD, ANDY Address: 36 SAVELLE DRIVE Address: 168 BUNKER PLACE City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREW J DODD TRES 01/25/2005