

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140791

FILED
Apr 19, 2006
Secretary of State

Entity Name: SANTA ROSA ISLAND PROPERTY COMPANY

Current Principal Place of Business:

854 HIGHWAY 98
SUITE #24
DESTIN, FL 32541

New Principal Place of Business:

1221 AIRPORT ROAD
SUITE 210
DESTIN, FL 32541 US

Current Mailing Address:

854 HIGHWAY 98
SUITE #24
DESTIN, FL 32541

New Mailing Address:

P.O. BOX 5626
DESTIN, FL 32540 US

FEI Number: 20-0467351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVATORI, LEO J
4001 TAMIAMI TRAIL NORTH SUITE 330
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRAIL NORTH
SUITE 330
NAPLES, FL 34103 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: LEO J. SALVATORI

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KREUSER, WILLIAM G. P
Address: 4467 CLIPPER COVE
City-St-Zip: DESTIN, FL 32541

Title: T () Delete
Name: KREUSER, WILLIAM G. P
Address: 4467 CLIPPER COVE
City-St-Zip: DESTIN, FL 32541

Title: V (X) Delete
Name: PEVEY, NORMA J
Address: 318 F BREAM AVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: S (X) Delete
Name: PEVEY, NORMA J
Address: 318 F BREAM AVE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: KREUSER, WILLIAM G. P
Address: 4467 CLIPPER COVE
City-St-Zip: DESTIN, FL 32541 US

Title: VPS (X) Change () Addition
Name: PEVEY, NORMA J
Address: 318F BREAM AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM G.P. KREUSER

DPT

04/19/2006

Electronic Signature of Signing Officer or Director

Date