


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90406 007 ***150.00

DOCUMENT # P04000068931

1. Entity Name
GRAND BAY DEVELOPERS OF ESCAMBIA COUNTY, INC.



Principal Place of Business
**21 E GARDEN ST, STE 211
 PENSACOLA, FL 32502**

Mailing Address
**P.O. BOX
 PENSACOLA, FL 32511-1392**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 1392
 Suite, Apt. #, etc.

City & State
Pensacola, FL.

City & State
Pensacola, FL.

Zip
32591-1392

Country
US

4192006 Chg-P CR2E034 (11/05)

4. FEI Number
20-1048638

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required



6. Name and Address of Current Registered Agent

**DUNNAM, KEVIN
 22 MORENO POINT RD
 # 15
 DESTIN, FL 32540**

7. Name and Address of New Registered Agent

Name
Bolley L. Johnson

Street Address (P.O. Box Number is Not Acceptable)
21 E. Garden St, Suite # 211

Pensacola, FL.

City
FL

Zip Code
32502

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Bolley L. Johnson* President & Agent *Bolley L. Johnson* *4/20/06*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNNAM, KEVIN 21 E GARDEN ST, STE 211 PENSACOLA, FL 32502	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, BOLLEY 21 E GARDEN ST, STE 211 PENSACOLA, FL 32502	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLEY, MARSHALL 21 E GARDEN ST, STE 211 PENSACOLA, FL 32502	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Dunnam, Kevin 21 E Garden St., Suite # 211 Pensacola, Florida 32502	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Johnson, Bolley 21 E. Garden St, Suite # 211 Pensacola, FL. 32502	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec & Treas. Colley, Marshall 21 E. Garden St., Suite 211 Pensacola, Florida 32502	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bolley L. Johnson*, President *Bolley L. Johnson* *4/20/06* *(850) 438-8433*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #