

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011258

Entity Name: NORTH LAGOON PARTNERS, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

3901 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

3901 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 59-3423609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COUNTS, STEVE
2104 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: COUNTS, STEVE
Address: 2104 THOMAS DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VD () Delete
Name: THACKER, LARRY
Address: 6676 VICTORY DRIVE
City-St-Zip: ACWORTH, GA 30102

Title: SD () Delete
Name: LEDMAN, THOMAS
Address: 511 HOLLIS AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: DAUBE, DANIEL JR.
Address: 200 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: DEANA, DAN
Address: 3712 PRESERVE BAY BLVD.
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D () Delete
Name: HILL, HAROLD
Address: 3512 FOX RUN BLVD.
City-St-Zip: PANAMA CITY BEACH, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D (X) Change () Addition
Name: LARK, SARAH
Address: 3901 THOMAS DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

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

SIGNATURE: STEVE COUNTS

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date