2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000023850

Entity Name: ROSEMARY BEACH COTTAGE RENTAL COMPANY

FILED Mar 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
16 SOUTH BARRETT SQ. PANAMA CITY BEACH, FL 32413					
Current Mailing Address:			New Mailing Address:		
PO BOX 611070 ROSEMARY BEACH, FL 32461					
FEI Number:	59-3455272	FEI Number Applied For () FEI Num	nber Not Appli	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E HIAN, HOWARD 2850 SUGARMAN LA JOLLA, CA 92		Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition WHEELER, JUSTIN 529 E. SOUTH TEMPLE SALT LAKE CITY, UT 84102	
Title: Name: Address: City-St-Zip:	V () E SELLECK, JULIE 16 SO. BARRETT PANAMA CITY BE	SQ.	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition SELLECK, JULIE H 16 SO. BARRETT SQ. PANAMA CITY BEACH, FL 32413	
Title: Name: Address: City-St-Zip:	DP () D BIENVENUE, PAT 529 EAST SOUTH SALT LAKE CITY	H TEMPLE	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition BIENVENUE, PATRICK 529 EAST SOUTH TEMPLE SALT LAKE CITY, UT 84102	
Title: Name: Address: City-St-Zip:	DTS () C CORRINE MAKI 529 E. SOUTH TE SALT LAKE CITY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () E PINNOCK, LAURI 529 E. SOUTH TE SALT LAKE CITY	EMPLE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition EYRING, JOHN 529 E. SOUTH TEMPLE SALT LAKE CITY, UT 84102	
Title: Name: Address: City-St-Zip:	VP () C GIFFORD, KENN 16 SO. BARRETT PANAMA CITY, F	SQ.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JULIE SELLECK VP 03/13/2009