

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 27, 2008 8:00 am**  
**Secretary of State**

05-27-2008 90044 030 \*\*\*550.00

**DOCUMENT # P98000073813**

1. Entity Name  
ROSEMARY BEACH REALTY INC.



Principal Place of Business  
16B SOUTH BARRETT SQUARE  
ROSEMARY BEACH, FL 32461

Mailing Address  
P.O. BOX 611070  
ROSEMARY BEACH, FL 32461



05202008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3549867

Applied For...  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
FORT LAUDERDALE, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME BIENVENUE, PATRICK D  
STREET ADDRESS 529 EAST SOUTH TEMPLE  
CITY-ST-ZIP SALT LAKE CITY, UT 84102

TITLE STD  
NAME MAKI, CORINNE  
STREET ADDRESS 529 EAST SOUTH TEMPLE  
CITY-ST-ZIP SALT LAKE CITY, UT 84102

TITLE VOD  
NAME PINNOCK, LAURENCE W  
STREET ADDRESS 529 EAST SOUTH TEMPLE  
CITY-ST-ZIP SALT LAKE CITY, UT 84102

TITLE VP  
NAME SELLECK, JULIE H  
STREET ADDRESS 16 S. BARRETT SQ  
CITY-ST-ZIP PANAMA CITY, FL 32413

TITLE VP  
NAME GIBSON, GARY  
STREET ADDRESS 1650 BARRETT SQ.  
CITY-ST-ZIP PANAMA CITY BEACH, FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Julie Selleck* JULIE SELLECK

5/20/08

850-278-2016