2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51314

Entity Name: COASTAL COMMUNITY ASSOCIATION, INC.

FILED Feb 04, 2013 Secretary of State CC5011360960

Date

Current Principal Place of Business:

1934 CR30A

PORT SAINT JOE, FL 32456

Current Mailing Address:

P.O. BOX 544

PT. ST JOE. FL 32456 US

FEI Number: 59-3170257 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JONES, CHARLES B 213 BOARDWALK AVE PORT ST. JOE, FL 32456 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: CHARLES B JONES 02/04/2013

Electronic Signature of Registered Agent

Officer/Director Detail:

Title VP Title SEC

NameSHAEFFER, RONNameFEDOTA, LESLIEAddress7609 SHORELINE DRIVEAddress341 BENT TREE RD

City-State-Zip: PORT ST JOE FL 32456 City-State-Zip: PORT SAINT JOE FL 32456

Title DIR Title PRES

NameANDERSON, JIMNameHARDMAN, PATRICIAAddress390 GULF PINES DRAddress123 MARINER LANE

City-State-Zip: PORT SAINT JOE FL 32456 City-State-Zip: PORT SAINT JOE FL 32456

Title TREA Title DIR

Name JONES, CHARLES B Name WILLIS, BOB

Address 213 BOARDWALK AVE Address 473 GULF PINES DRIVE

City-State-Zip: PORT ST JOE FL 32456 City-State-Zip: PORT ST JOE FL 32456

Title DIR

Name THOMPSON, JERRY

Address 971 INDIAN PASS ROAD
City-State-Zip: PORT ST JOE FL 32456

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES B JONES TREASURE 02/04/2013