

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005936

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** EAGLE BAY LANDING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21 N SPOOKY LANE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

21 N SPOOKY LANE  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 20-1828059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLIAM S. HOWELL, JR., J.D., P.A.  
1727 S COUNTY HWY 393  
SANTA ROSA BEACH, FL 32459 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MORRIS, FLYNN D JR  
Address: 21 N SPOOKY LANE  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D ( ) Delete  
Name: BRYAN, THOMAS J JR  
Address: 1819 PEPPERELL PKWY  
City-St-Zip: OPELIKA, AL 36801

Title: D ( ) Delete  
Name: ROGERS, EDWARD E  
Address: PO BOX 1068  
City-St-Zip: FAIRHOPE, AL 36533

**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:

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

SIGNATURE: FLYNN D. MORRIS, JR.

D

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date