

FILE NOW: FILING FEE IS \$61.25

FILED  
Jun 27 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 739439 (8)**

1. Corporation Name  
**SUNNYSIDE BEACH AND TENNIS CLUB CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>M ASSOCIATION, INC. 22400 FRONT BEACH ROAD PANAMA CITY BEACH FL 32413-8211</b>	Mailing Address <b>M ASSOCIATION, INC. 22400 FRONT BEACH ROAD PANAMA CITY BEACH FL 32413-1211</b>
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<b>21</b> 2. Principal Place of Business	<b>26</b> 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
Zip	Zip
<b>25</b> Country	<b>30</b> Country

<b>3.</b> Date Incorporated or Qualified <b>06/22/1977</b>	<b>3a.</b> Date of Last Report <b>04/29/1996</b>
<b>4.</b> FEI Number <b>59-1762938</b>	Applied For Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

~~ANDREWS, GERALD T.~~ *Deceased*  
22400 FRONT BEACH RD  
PANAMA CITY BCH FL 32413

**10. Name and Address of New Registered Agent**

<b>81</b> Name <b>Doris Kendrick</b>
<b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>22400 Front Beach Rd #64</b>
<b>83</b>
<b>84</b> City <b>Panama City Beach</b> <b>FL</b> <b>85</b> Zip Code <b>32413</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Doris Kendrick* DATE *29 apr 97*

**12. OFFICERS AND DIRECTORS**

TITLE	P	<input type="checkbox"/> DELETE
NAME	GITCHELL, ROBERT	
STREET ADDRESS	207 SOUTHFIELD RD	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	GITCHELL, ROBERT	
STREET ADDRESS	207 SOUTHFIELD RD	
CITY-ST-ZIP	PANAMA CITY BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HESS, SCOTT	
STREET ADDRESS	206 LAKEWOOD	
CITY-ST-ZIP	ENTERPRISE AL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SCHOFIELD, PETE	<input checked="" type="checkbox"/>
STREET ADDRESS	205 WELTON DR	
CITY-ST-ZIP	MADISON AL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BUGG, TIMOTHY	
STREET ADDRESS	RT11, BOX 619	
CITY-ST-ZIP	DOTHAN AL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCULLEY, HERMAN	
STREET ADDRESS	3408 RIDGEDELL CIR	
CITY-ST-ZIP	BIRMINGHAM AL	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SCOFIELD, Pete	
1.3 STREET ADDRESS	205 Welton Dr	
1.4 CITY-ST-ZIP	Madison, Al 35758	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DORIS KENDRICK	
3.3 STREET ADDRESS	22400 Front Beach Rd #64	
3.4 CITY-ST-ZIP	Panama City Beach, Fl 32413	
4.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	JANE STEINHAUER	
4.3 STREET ADDRESS	124 Circle Dr	
4.4 CITY-ST-ZIP	Hendersonville, TN 37075	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)