

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90050 008 ****61.25

DOCUMENT # 739439

1. Entity Name

SUNNYSIDE BEACH AND TENNIS CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**M ASSOCIATION, INC.
 22400 FRONT BEACH ROAD
 PANAMA CITY BEACH FL 32413-8211**

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 22400 FRONT BEACH ROAD
 PANAMA CITY BEACH FL 32413-8211**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1762938

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LYNCH, JACQUELYN
 22400 FRONT BCH RD
 PANAMA CITY BEACH FL 32407**

Name: **Deborah Lloyd**
 Street Address (P.O. Box Number is Not Acceptable): **22400 Front Beach Rd.**
 City: **Panama City Beach** FL Zip Code: **32413**

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.

SIGNATURE *Deborah Lloyd*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **1/10/02**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	COLE, BRAD	
STREET ADDRESS	4238 BRITT RD	
CITY-ST-ZIP	TUCKER GA 30084	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	LOTHER, ED	
STREET ADDRESS	5035 ABERDEEN WY	
CITY-ST-ZIP	BIRMINGHAM AL 35242	
TITLE	S	<input type="checkbox"/> Delete
NAME	GODPREY, MIKE	
STREET ADDRESS	3454 INDIAN LAKE LN	
CITY-ST-ZIP	PELHAM AL 35124	
TITLE	D VP	<input type="checkbox"/> Delete
NAME	MILLER, CRAIG	
STREET ADDRESS	521 DERBY LN	
CITY-ST-ZIP	MONTGOMERY AL 36109	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	YOUNG, JUDY	
STREET ADDRESS	2239 ADDISON RD	
CITY-ST-ZIP	MARIETTA GA 30066	
TITLE	T	<input type="checkbox"/> Delete
NAME	FIELDS, TOM	
STREET ADDRESS	5653 CASCADE CT	
CITY-ST-ZIP	COLUMBUS GA 31904	

TITLE	AL Allen - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	11560 Hauge Rd	
STREET ADDRESS	Roswell, GA. 30076	
CITY-ST-ZIP		
TITLE	Jeff Rozhon - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	22013 Sunnyside lane	
STREET ADDRESS	Panama City Beach, FL 32413	
CITY-ST-ZIP		
TITLE	Ann Hagae - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	729 Gaymont Dr.	
STREET ADDRESS	Nashville, TN. 37217	
CITY-ST-ZIP		
TITLE	Linda Turner - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2190 Addison Rd.	
STREET ADDRESS	Marietta, GA. 30066	
CITY-ST-ZIP		
TITLE	Danny Hayes - Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1003 Brookstone Ct.	
STREET ADDRESS	Dorhan, AL. 36303	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 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 617, 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 *Linda Turner* **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **1/31/02** DAYTIME PHONE # **7795-1007**

CR2E037 (9/01)