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Feb 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 747273 (1)
1. Corporation Name
SANDPIPER VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 1096 OLD HIGHWAY 98, SUITE C-102B, DESTIN FL 32541, US
Mailing Address: P.O. BOX 6417, DESTIN FL 32541-6417, US

3. Date Incorporated or Qualified: 05/21/1979
3a. Date of Last Report: 02/28/1996
4. FEI Number: 59-1750945
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
LEWIS, LEYDA R.
1096 OLD HIGHWAY 98
SUITE C-102B
DESTIN FL 32541

10. Name and Address of New Registered Agent (81-85)
81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City
85 Zip Code

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: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	DOWNES, KATHY	
STREET ADDRESS	12863 MASON MANOR	
CITY-ST-ZIP	ST. LOUIS MO	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HERMAN, RICHARD	
STREET ADDRESS	146 ST. ANDREWS DRIVE	
CITY-ST-ZIP	FRANKLIN TN	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WITTRIG, TWILA	
STREET ADDRESS	727 SANDPIPER VILLAGE - SANDESTIN RESORT	
CITY-ST-ZIP	DESTIN FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	LUTZ, ARNO	
STREET ADDRESS	747 SANDPIPER VILLAGE- SANDESTIN	
CITY-ST-ZIP	DESTIN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LANNOM, EDWARD H	
STREET ADDRESS	1810 COOPER DRIVE	
CITY-ST-ZIP	DYERSBURG TN	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HILTON, ROBERT	
STREET ADDRESS	3637 SHANDWICK PLACE	
CITY-ST-ZIP	BIRMINGHAM AL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
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 in an attachment with an address.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE # 0073653

CR2E037 (9/96)