


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 18, 2003 8:00 am
Secretary of State

06-18-2003 90021 032 ****61.25

DOCUMENT # 760366
1. Entity Name
East Pass Towers
Condominium Association Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
100 Gulf Shore Dr
Suite, Apt. #, etc.

3. Mailing Address
100 Gulf Shore Dr
Suite, Apt. #, etc.

City & State
Destin FL

City & State
Destin FL

Zip
32541 Country
Okaloosa

Zip
32541 Country
Okaloosa

DO NOT WRITE IN THIS SPACE

4. FEL Number
59-2579097 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent
Name
Dale E Peterson Realty Inc
Street Address (P.O. Box Number is Not Acceptable)
321 Hwy 98E
City
Destin FL Zip Code
32541

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>PD Robert Koehl 3213 Tolmas Dr Metairie, LA 70002</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>VPO R. Wayne Lewis 100 Gulf Shore Dr, #606 Destin FL 32541</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>STD Mary Larish 100 Gulf Shore Dr, #204 Destin FL 32541</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D James McClendon PO Box 506 Wetumpka AL 36092</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D Terri Rownsaville 30346 Middle Creek Cir Spanish Ft., AL 36527</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037B (12/02)