2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2004 8:00 am
Secretary of State
05-05-2004 90212 042 ****61.25

DOCUMENT # N00000003451

1. Entity Name

SUNBURST ON THE BAY HOMEOWNER'S ASSOCIATION, INC.

24069309

MOORE CR2E037 (11/03)

Principal Place of Business	Mailing Address
3100 SCENIC HWY 98 SUITE 107 DESTIN FL 32541	3100 SCENIC HWY 98 SUITE 107 DESTIN FL 32541

2. Principal Place of Business	3. Mailing Address
420 C Bayshore Dr.	420 C Bayshore Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Destin FL.	City & State: Destin, FL.
Zip: 32550 Country: USA	Zip: 32550 Country: USA

4. FEI Number: 59-3545530 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

REYNOLDS, KATHLEEN -ESQ.
3100 SCENIC HWY 98
SUITE 107
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name: John R. Kazek
Street Address (P.O. Box Number is Not Acceptable): 420 C Bayshore Dr.
City: Destin FL Zip Code: 32550

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: John R. Kazek Pres/Dir DE: John R. Kazek 2/17/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Due By May 1, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KAZEK, JOHN R 3100 SCENIC HWY 98, STE 118 DESTIN FL 32541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KAZEK, JON 3100 SCENIC HWY 98, STE 118 DESTIN FL 32541	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD KAZEK, TERRI B 3100 SCENIC HWY 98, STE 118 DESTIN FL 32541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: John R. Kazek John R Kazek 2/17/04 850-259-3240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #