

FILE NOW: FILING FEE IS \$61.25

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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N03340

1. Corporation Name
SANDY CREEK AIRPARK OWNERS ASSOCIATION, INC.

Principal Place of Business
 12901 PARK WAY
 PANAMA CITY FL 32404
 US

Mailing Address
 12901 PARK WAY
 PANAMA CITY FL 32404
 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		05/30/1984	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2637709	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing <input type="checkbox"/>	
24		29		\$5.00 May Be Added to Fees	
Country		Country		Trust Fund Contribution	
25		30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
EPLER, BRANSON 12901 PARK WAY PANAMA CITY FL 32404				81	Name			
				Judith C. Young				
				82	Street Address (P.O. Box Number is Not Acceptable)			
				12908 Air Way Street				
				83				
				84	City	FL	85	Zip Code
				Panama City			32404	

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: *Judith C. Young* DATE: 4-21-99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D/P	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KILLIAN, JOHNE			1.2 NAME	John D. Lincoln III		
STREET ADDRESS	13304 AIR WAY			1.3 STREET ADDRESS	11347 Front Beach Road		
CITY-ST-ZIP	PANAMA CITY FL 32404			1.4 CITY-ST-ZIP	Panama City Beach, FL 32407		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	D/VP/T	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SUMNER, THURSTON			2.2 NAME	Judith C. Young		
STREET ADDRESS	13121 PARK WAY			2.3 STREET ADDRESS	12908 Air Way Street		
CITY-ST-ZIP	PANAMA CITY FL			2.4 CITY-ST-ZIP	Panama City, FL 32404		
TITLE	ST	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	D/S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	TURNER, RICHARD D			3.2 NAME	Wanda H. Churchwell		
STREET ADDRESS	13311 AIRWAY			3.3 STREET ADDRESS	13117 Park Way		
CITY-ST-ZIP	PANAMA CITY FL			3.4 CITY-ST-ZIP	Panama City, FL 32404		
TITLE	DD	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	EPLER, BRANSON E.			4.2 NAME	John L. Gioiello		
STREET ADDRESS	4652 BROOK FOREST DRIVE			4.3 STREET ADDRESS	402 Jenks Avenue		
CITY-ST-ZIP	PANAMA CITY FL			4.4 CITY-ST-ZIP	Panama City, FL 32401		
TITLE	D	<input checked="" type="checkbox"/> DELETE		5.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WALSH, EDWARD A.			5.2 NAME	Joel R. Magazine		
STREET ADDRESS	13000 AIR WAY			5.3 STREET ADDRESS	9190 S.W. 72nd Street		
CITY-ST-ZIP	PANAMA CITY FL			5.4 CITY-ST-ZIP	Miami, FL 33173		
TITLE	PD	<input checked="" type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	O'CONNOR, ED			6.2 NAME			
STREET ADDRESS	13110 PARK WAY			6.3 STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL			6.4 CITY-ST-ZIP			

14. 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 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, with all other like empowered.

SIGNATURE: *Judith C. Young* SIGNATURE REQUIRED DATE: 4-21-99 (850) 871-2911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Judith C. Young, Vice President

CR2E037 (11/98)