FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03461 (3)

1. Corporation Name

TRISTAN TOWERS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1200 FORT PICKENS RD PENSDACOLA BCH. FL 32561	1200 FORT PICKENS RD PENSDACOLA BCH. FL 32561

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/06/1984
3a. Date of Last Report: 04/11/1994
4. FEI Number: 59-2545849 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

ANDERSON, JAMES
1200 FT PICKENS RD
PENSACOLA BCH FL 32561

10. Name and Address of New Registered Agent

81 Name: BURNS, RICHARD
82 Street Address (P.O. Box Number is Not Acceptable): 1200 FT PICKENS ROAD#9C
83: TRISTAN TOWERS
84 City: PENSACOLA BEACH FL 85 Zip Code: 32561

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Richard A. Burns — DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition PRESIDENT
NAME	ANDERSON, JAMES	12 NAME	BURNS, RICHARD
STREET ADDRESS	1200 FT PICKENS RD	13 STREET ADDRESS	1200 FT PICKENS RD #9C
CITY-ST-ZIP	PENSACOLA BCH FL	14 CITY-ST-ZIP	PENSACOLA BCH FL 32561
TITLE	D	21 TITLE	D ☐ Change ☐ Addition BOARD MEMBER
NAME	STEBBINS, ARTHUR	22 NAME	STEBBINS, ARTHUR
STREET ADDRESS	1200 FT PICKENS RD #5A	23 STREET ADDRESS	5051 GRANDE DR #E-3
CITY-ST-ZIP	PENSACOLA FL	24 CITY-ST-ZIP	PENSACOLA FL 32504
TITLE	PD	31 TITLE	☐ Change ☐ Addition SECRETARY
NAME	BURNS, RICHARD	32 NAME	ROD FISHBURN
STREET ADDRESS	1200 FT. PICKENS ROAD #9C	33 STREET ADDRESS	1200 FT PICKENS ROAD #1B
CITY-ST-ZIP	PENSACOLA BCH FL	34 CITY-ST-ZIP	PENSACOLA BCH FL 32561
TITLE	V	41 TITLE	D ☐ Change ☐ Addition VICE PRESIDENT
NAME	WINKLER, THOMAS	42 NAME	TOM WINKLER
STREET ADDRESS	1200 FT PICKENS RD	43 STREET ADDRESS	1200 FT PICKENS ROAD #8A
CITY-ST-ZIP	PENSACOLA BCH. FL	44 CITY-ST-ZIP	PENSACOLA BEACH FL 32561
TITLE	D	51 TITLE	D ☐ Change ☐ Addition BOARD MEMBER
NAME	HUNT, BILL	52 NAME	MILLIE CARPENTER
STREET ADDRESS	411 N. SUNSET BLVD.	53 STREET ADDRESS	P O BOX 30147 N/A
CITY-ST-ZIP	GULF BREEZE FL	54 CITY-ST-ZIP	PENSACOLA FL 32503
TITLE	SD	61 TITLE	☐ Change ☐ Addition TREASURER
NAME	WORK, JUDY	62 NAME	WORK, JUDY
STREET ADDRESS	1200 FT PICKENS RD	63 STREET ADDRESS	1200 FT PICKENS ROAD #12A
CITY-ST-ZIP	PENSACOLA BEACH FL	64 CITY-ST-ZIP	PENSACOLA BEACH FL 32561

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemption pursuant to 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.

SIGNATURE: Richard A. Burns — 4-14-95 — 904-932-9341
(SIGNATURE AND TYPED OR PRINTED NAME OF INCOMING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

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