## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED DOCUMENT # N05377** May 02, 2000 8:00 am Secretary of State DESTIN YACHT CLUB OWNERS ASSOCIATION, INC. 05-02-2000 90142 026 \*\*\*\*61.25 Principal Place of Business Mailing Address 320 HWY 98 EAST POST OFFICE BOX 5273 DESTIN FL 32541 **DESTIN FL 32540-5273** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-2653298 Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Kraemer, Mary K 36494 EMERALD COAST PARKWAY DESTIN FL 32541 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD TITI F PD Delete TITLE Change ★ Addition CAWTHORN, EDWIN NAME NAME NUNN, R. L STREET ADDRESS STREET ADDRESS 320 HIGHWAY 98 EAST, #1203 320 Hwy 98 East, #604 CITY-ST-ZIP CITY-ST-ZIP Destin, FL 32541 DESTIN FL Addition **⊠** Delete TITLE Change NAME treadwell, thomas h NAME McLAUGHLIN, MICHAEL STREET ADDRESS STREET ADDRESS 320 HIGHWAY 98 EAST, #1003 8731 Bayou Castelle CITY-ST-7IE CITY-ST-7IP DESTIN FL 32541 Gautier, MS 39553 Addition Delete TITLE Change TITLE NAME LUCCASEN, RAPHAEL NAME ROGERS, RICHARD STREET ADDRESS STREET ADDRESS 2121-VIKING CIR P.O. Box 151 South Pittsburg, TN CITY-ST-ZIE CITY-ST-ZIP Vestavia Hills al 35216 🛚 Delete TITLE **XX**Change Addition TITLE DAVIS, RITA H M.D. NAME PACE, GIL NAME STREET ADDRESS 320 HIGHWAY 98 EAST, #501 STREET ADDRESS P.O. Box 6753 CITY-ST-ZIP CITY-ST-ZIP Americus, GA 31709 DESTIN FL 32541 Delete TITLE ▼ Change Addition NAME MORRIS, DAVID NAME TURBERVILLE, LEE STREET ADDRESS STREET ADDRESS **509 MIDWAY CIRCLE** 306 Woodbridge Drive CITY-ST-ZIP CITY-ST-ZIP BRENTWOOD TN 37027 Daphne AL 36526 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE 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 Block 11 if changed, or on an attachment with an address, with all other likes apowered.

Edwin Cawthorn, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

Daytime Phone #

Date