

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N05377

1. Entity Name

DESTIN YACHT CLUB OWNERS ASSOCIATION, INC.

Principal Place of Business

320 HWY 98 EAST
DESTIN FL 32541
US

Mailing Address

POST OFFICE BOX 5273
DESTIN FL 32540
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2653298

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROY, GAYLE S
320 HIGHWAY 98 EAST
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name

Gil Pace

Street Address (P.O. Box Number is Not Acceptable)

SEE BELOW

City

FL

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

3 MAR 02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CAWTHORN, EDWIN
STREET ADDRESS 320 HWY 98 EAST, #604
CITY-ST-ZIP DESTIN FL 32541

☒ Delete

TITLE VP
NAME MCLAUGHLIN, MICHAEL
STREET ADDRESS 8731 BAYOU CASTELLE
CITY-ST-ZIP GAUTIER MS 39553

☐ Delete

TITLE D
NAME ROGERS, RICHARD
STREET ADDRESS P.O. BOX 151
CITY-ST-ZIP SOUTH PITTSBURG TN 37380

☒ Delete

TITLE SD
NAME PACE, GIL
STREET ADDRESS P.O. BOX 6753
CITY-ST-ZIP AMERICUS GA 31709

☐ Delete

TITLE T
NAME KINNEY, ROBERT
STREET ADDRESS P.O. BOX 71682
CITY-ST-ZIP ALBANY GA 31708

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S
NAME Tanski, Chet
STREET ADDRESS 320 Hwy 98 East #905
CITY-ST-ZIP Destin FL 32541

Change

☒ Addition

TITLE D
NAME Haney, Patrick
STREET ADDRESS P.O. Box 145
CITY-ST-ZIP Elba AL 36323

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE PD
NAME Pace, Gil
STREET ADDRESS P.O. Box 6753
CITY-ST-ZIP Americus GA 31709

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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:

CHET TANSKI SECRETARY

3/22/02

805

654-1084



DO NOT WRITE IN THIS SPACE

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