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FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N05993

(3)

THE COMMODORE OWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address 4715 THOMAS DRIVE 4715 THOMAS DRIVE THE FLOOR ATH FLOOR PANAMA CITY BEACH FL 32408 PANAMA CITY BEACH FL 32408-7324 3. Date Incorporated or Qualified US 3a. Date of Last Report 11/02/1984 01/26/1996 2. Principal Place of Business 4. FEI Number 59-2502838 2a. Mailing Address Applied For 4715 THOMAS DRIVE 4715 THOMAS DRIVE Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 FAWAMA CITY BOH ANDMA OUT BOH Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 32408 32408 Yes No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HESS, BRIAN D. Street Address (P.O. Box Number is Not Acceptable) 82 9108 FRONT BEACH RD. 83 PANAMA CITY FL 32408 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE DVP 1.1 TITLE Change X Addition TERBOT, BILL NAME 1.2 NAME 4715 THOMAS DR., #1210 STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY BEACH FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Addition HURLEY, GENE NAME 2.2 NAME STREET ADDRESS 4715 THOMAS DR., #1101 2.3 STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 2. 4 CITY - ST - ZIP ☐ DELETE Change TITLE 3.1 TITLE Addition BERMUTH, WAYNE NAME BERHUTH, WAYNE 3.2 NAME STREET ADDRESS 4715 THOMAS DR. #1110 -3.3 STREET ADDRESS BTHIN. LAGOON DRIVE CITY - ST - ZIP PANAMA CITY BEACH FL PANAMA CITY BEH, FL 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition NAME EVERETT, KENNETH 4. 2 NAME STREET ADDRESS 554 OPPERT ROAD 4.3 STREET ADDRESS DOTHAN AL CITY - \$1 - ZIP 4.4 CITY-ST-ZIP TITLE DELETE Addition 5.1 TITLE Don Chemi NAME CHERRY, DON 5.2 NAME 6323 Thomas Dr. \$503 1815 CROMWELL DR. STREET ADDRESS 5.3 STREET ADDRESS Panama City Beach, FL NASHVILLE IN CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE HERMANSEN, KEN 6.2 NAME 4715 THOMAS DRIVE, #505 4715 THOMAS DR. \$ 505 STREET ADDRESS **6.3 STREET ADDRESS**

6.4 City-St-ZiP

SIGNATURE:

CITY-ST-ZIP

PANAMA CITY BEACH FL

14. Ido 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.

FILED

Jan 17 1997 8:00am

Secretary of State

(96/6) (96/6)