1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N10021

1. Corporation Name

PIRATES COVE INLET MASTER HOMEOWNERS' ASSOCIATIO N, INC.

Principal	Place	of	Business
300 CAIN	RD.		

PANAMA CITY BCH. FL 32413

Mailing Address

300 CAIN RD.

PANAMA CITY BEACH FL 32413

## FILED May 10, 1999 8:00 am § Secretary of State 05-10-1999 90054 005 \*\*\*\*61.25



21 Principal Place of Business	US									
Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Sp-2884891   Applied For Sp-2884891   Sp-288489	}			_						
Suite, Apt. #, etc. 22	2. Principal P	1 1110000 11000 11000								
Specificate of Status Desired   Status		·					1 145	plied For		
City & State 23   28   28   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   29   30   5. Certificate of Status Desired   \$8.75 Academonal City Box   25   29   29   29   29   29   29   29		#, etc.					<del> </del>			
See   Sequence   Security   See   Sequence   Security   See   Sequence   Sequence   See   Sequence   S						30 2004031		<del></del>		
2/p   Country   2/p   Country   5. Election Campaign Financing   \$5.00 May 8e   Addition   Added to Fees   9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent   28. Street Address (P.O. Box Number is Not Acceptable)   83   Street Address (P.O. Box Number is Not Acceptable)   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   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 agent in a final militar with, and accept the obligation of . Section 58 interest acceptable   83   Significant and acceptable   12. Name   12. Name   12. Name   Not Acceptable   Not Acceptable		e	-			5. Certifcate of Status Desired	<b>4</b>			
24 25 25 29 30 Trust Fund Contribution Added to Fees  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  BOWEN, TOBBIE 300 CAIN RD  PANAMA CITY BCH. FL 32413  82 Street Address (P.O. Biox Number is Not Acceptable)  83 Street Address (P.O. Biox Number is Not Acceptable)  84 City  FL 85 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered corporation submits this statement for the purpose of changing its registered corporation submits this statement for the purpose of changing its registered corporation submits this statement for the purp		Country		Country		6. Election Campaign Financing —	\$5.00	May Re		
9. Name and Address of Current Registered Agent  81 Name  BOWEN, TOBBIE  300 CAIN RD  PANAMA CITY BCH. FL 32413  11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Sistutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in a familiar with, and accept the obligations of, Section 67.0503, Florids Statutes.  SIGNATURE  Signifum, typed of prired name of ingotimed agent and title of appointment as registered agent. In a familiar with, and accept the obligations of, Section 67.0503, Florids Statutes.  SIGNATURE  Signifum, typed of prired name of ingotimed agent and title of appointment as registered agent. In ITITIE  WPD  OFFICERS AND DIRECTORS IN 12  TITLE  VPD  OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS IN 12  INTITIE  ON ARK THOMPSON'  13. STREET ADDRESS TOO FFICERS AND DIRECTORS IN 12  INTITIE  ON ARK THOMPSON'  13. STREET ADDRESS IS DO CALL IN RQ  ANAMA CITY BCH, FL. 32413  TITLE  ON CALL IN RQ  PANAMA CITY BCH, FL. 32413  TO SI DELETE  3. TITLE  ON ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHAN	<u> </u>	·	<b>⊢</b> - ' ⊢	¬ ´			•	, ,		
BOWEN, TOBBIE 300 CAIN RD PANAMA CITY BCH. FL 32413  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zp Code  84 City FL 85 Zp Code  85 City FL 85 Zp Code  86 City FL 85 Zp Code  87 City FL 85 Zp Code  86 City FL 85 Zp Code  87 City FL 85 Zp Code  88 City FL 85 Zp Code  88 City FL 85 Zp Code  89 City FL 85 Zp Code  89 City FL 85 Zp Code  80 City FL 85 Zp Code  81 City FL 85 Zp Code  82 City FL 85 Zp Code  84 City FL 85 Zp Code  85 Zp Code  86 City FL 85 Zp Code  86 City FL 85 Zp Code  87 Zp Code  88 City FL 85 Zp Code  88 City FL 85 Zp Code  88 City FL 85 Zp Code  89 City FL 85 Zp Code  89 City FL 85 Zp Code  89 City FL 85 Zp Code  80 Zp Code  80 Zp Code  81 Zp Code  82 Zp Code  84 City FL 85 Zp Code  85 Zp Code  86 City FL 85 Zp Code  86 City FL 85 Zp Code  87 Zp Code  88 City FL 85 Zp Code  88 City FL 85 Zp Code  89 Zp Code  89 Zp Code  90 Zp Code	[24]		_ <del></del>	<u>-                                    </u>			ed Agent			
300 CAIN RD PANAMA CITY BCH. FL 32413  83  84 City  FL 85 Zip Code  T1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registrored agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered affice or registrored agent and tear of specials.  SIGNATURE  SIGNATURE  12. OFFICIERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  VPD D Change BAddition  NME WINDHAM, BUDDY  STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  VPD D Change BAddition  NME STREET ADDRESS  OCTY-57-2P  PANAMA CITY BCH. FL 32413  TITLE  O DELETE  3. STREET ADDRESS		- Hallio diversity		81	Name					
300 CAIN RD PANAMA CITY BCH. FL 32413  83  84 City  FL 85 Zip Code  T1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registrored agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered affice or registrored agent and tear of specials.  SIGNATURE  SIGNATURE  12. OFFICIERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  VPD D Change BAddition  NME WINDHAM, BUDDY  STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  VPD D Change BAddition  NME STREET ADDRESS  OCTY-57-2P  PANAMA CITY BCH. FL 32413  TITLE  O DELETE  3. STREET ADDRESS	POWEN T	OBBIC		82	Ctroot A	Address (B.O. Bay Number is Not Acceptable)				
PANAMA CITY BCH. FL 32413  83  84 City  FL 85 Zip Code  T1. 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, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  VPD				02	82 Street Address (P.O. Box Number is Not Acceptable)					
State   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 nereby eccept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby eccept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby eccept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby eccept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby eccept the appointment as registered degrees.    State				83						
TI. 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, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, based or printed name of ingestered agent and title if appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  Signature, based or printed name of ingestered agent and title if appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  III.	FAUSTING	5/11 BOH. 1 L 02410		\ <u>.</u>	0.1		gs Zin (	Code		
orfice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's District of Section 617.0503, Florida Statuties.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE WINDHAM, BUDDY 12 NAME MARK THOMPS OF 15 NRC 11 NRC 11 NRC 11 NRC 12 NAME NAME NITHER ADDRESS 147 CAIN RD. 13 STREET ADDRESS 147 CAIN RD. 13 STREET ADDRESS 15 CHI'N ST.2P PANAMA CITY BEACH FL 32413 14 CITY-ST-2P PANAMA CITY BEACH FL 32413 22 NAME NAME STREET ADDRESS 301 CAIN RD 22 NAME NAME STREET ADDRESS 301 CAIN RD 22 NAME NAME STREET ADDRESS 301 CAIN RD 33 STREET ADDRESS 301 CAIN RD 33 STREET ADDRESS 301 CAIN RD 33 STREET ADDRESS 301 CAIN RD 34 CITY BEACH FL 32413 34 CITY-ST-2P PANAMA CITY BEACH FL 32413 35 TREET ADDRESS 301 CAIN RD 35 STREET ADDR	}			84	City	F	L S Zip	2008		
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SIGNATURE    Signature. hybrid of printed name of registered spent and tase if spotiatable.   (NOTE: Registered Appert signature required when reinstating)   DATE	office or n	enistered agent or both, in the State o	of Florida. Such change was auth	iorizea by	the corpo	oration's board of directors. I hereby accept the ap	pointment as re	jistered		
Signature, typed or primed name of registered agent and test algoritables.   (NOTE: Registered Agent signature required when institation)   (NOTE: Registered Agent signature required when institation   (NOTE: Registered Agent signature required when its si	_	in familial with, and accept the congett	0113 01, 0000011 0 17 10000, 7 10110	or Diameter						
TITLE VPD   DELETE   LITTLE   DAME   STREET ADDRESS   TAY CAIN RD.   Change   MARK   THOMPSON   STREET ADDRESS   TAY CAIN RD.   Change   MARTIN   STREET ADDRESS   TAY RD.   Change   MARTIN   CHANGE   CHA	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ager	it signature re	squied with remaining/				
MAME WINDHAM, BUDDY STREET ADDRESS CITY-ST-ZP PANAMA CITY BCH. FL 32413  TITLE O NAME MCDANIEL, MARTIN STREET ADDRESS 303 CAIN-RD CITY-ST-ZP PANAMA CITY BEACH FL 32413  TITLE PD NAME SUMMERLIN, JOESEPH STREET ADDRESS 301 CAIN RD STREET ADDRESS OCTY-ST-ZP PANAMA CITY BEACH FL 32413  TITLE D D DELETE STREET ADDRESS CITY-ST-ZP PANAMA CITY BEACH FL 32413  TITLE TD D DELETE TITLE TD DELETE TITLE TD DELETE STREET ADDRESS CITY-ST-ZP PANAMA CITY BCH. FL STREET ADDRESS CITY-ST-ZP PANAMA CITY BCH. FL STREET ADDRESS CITY-ST-ZP TITLE SD NAME STREET ADDRESS CITY-ST-ZP FANAMA CITY BCH. FL TO-SD	12.	OFFICERS AND		13.						
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MME MCDANIEL, MARTIN STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32413  TITLE PD SUMMERLIN, JOESEPH STREET ADDRESS CITY-ST-ZIP FANAMA CITY BEACH FL 32413  TITLE TD SUMMER LORSS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE TD DELETE STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ANAMA CITY BEACH FL 32413  TITLE TD DELETE STREET ADDRESS 3.4 CITY-ST-ZIP ANAMA CITY BCH. FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE SD BOWDEN, DAPHANE STREET ADDRESS CITY-ST-ZIP TITLE SD Change Addition Addition Change Change Addition Change Change Addition Change Change Change Addition Change Chan	CITY-ST-ZIP	PANAMA CITY BCH. FL 32413		1.4 CITY-S	T-Z1P	MANAMA CITY BCH, FL. 33	<u> 413</u>	A Later		
STREET ADDRESS  OCTY-ST-ZIP  PANAMA CITY BEACH FL 32413  TITLE  PD  SUMMERLIN, JOESEPH  STREET ADDRESS  CITY-ST-ZIP  PANAMA CITY BEACH FL 32413  TITLE  TD  STREET ADDRESS  OCTY-ST-ZIP  PANAMA CITY BEACH FL 32413  TITLE  TD  STREET ADDRESS  OCTY-ST-ZIP  PANAMA CITY BCH. FL  STREET ADDRESS  CITY-ST-ZIP  FL DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  SD  STREET ADDRESS  CITY-ST-ZIP  TITLE  SD  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  TITLE  SD  STREET ADDRESS  CITY-ST-ZIP  Addition  Addition  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Change  Addition  Addition	TITLE	0	<b>☼</b> DELETE	2.1 TITLE		0	Change	X Addition		
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NAME  NAME SUMMERLIN, JOESEPH STREET ADDRESS SOL CAIN RD STREET ADDRESS SOL CITY. ST. ZIP SOL STREET ADDRESS CITY. ST. ZIP TITLE SOL SOL ST.	CITY-ST-ZIP	PANAMA CITY BEACH FL 32413			T-ZIP	PANAMACITY BCH, + L. 32	<u>ціз</u>			
STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32413  TITLE TITLE TD DELETE 4.1 TITLE BOWEN, TOBBIE STREET ADDRESS OCTY-ST-ZIP PANAMA CITY BCH. FL 32413  3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE SO CITY-ST-ZIP PANAMA CITY BCH. FL 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP FANAMA CITY BCH. FL 5.1 TITLE SO NAME BOWDEN, DAPHANE STREET ADDRESS CITY-ST-ZIP TITLE SO SO STREET ADDRESS CITY-ST-ZIP TITLE DELETE SO SA STREET ADDRESS CITY-ST-ZIP TITLE DELETE SO CHIN Rd PANAMA CITY BCH. FL. 32413  3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Addition Change Addition	TITLE	PD	<b>⊠</b> DELETE	3.1 TITLE			<b>⊠</b> Change	Magainou		
CITY-ST-ZIP PANAMA CITY BEACH FL 32413  TITLE TD DELETE 4.1 TITLE  NAME BOWEN, TOBBIE  STREET ADDRESS CITY-ST-ZIP PANAMA CITY BCH. FL  TITLE  SD PANAMA CITY BCH. FL  TITLE  SD PANAMA CITY BCH. FL  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  TITLE  SO STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  TITLE  SO STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  SA CITY-ST-ZIP  TITLE  Change Addition  Addition  Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition	NAME	SUMMERLIN, JOESEPH		3.2 NAME	1	TOBBIE BOWEN				
NAME  BOWEN, TOBBIE  STREET ADDRESS  CITY-ST-ZIP  PANAMA CITY BCH. FL  TITLE  SD  BOWDEN, DAPHANE  STREET ADDRESS  CITY-ST-ZIP  SD  BOWDEN, DAPHANE  STREET ADDRESS  CITY-ST-ZIP  S1 TITLE  S2 NAME  S1REET ADDRESS  CITY-ST-ZIP  KINSTON AL  DELETE  6.1 TITLE  Change  Addition  Addition  Change  Addition  Addition	STREET ADDRESS	301 CAIN RD		3.3 STREET	ADDRESS	302 CHIN Rd	5.			
NAME  BOWEN, TOBBIE  STREET ADDRESS  CITY-ST-ZIP  PANAMA CITY BCH. FL  TITLE  SD  BOWDEN, DAPHANE  STREET ADDRESS  CITY-ST-ZIP  SD  BOWDEN, DAPHANE  STREET ADDRESS  CITY-ST-ZIP  S1 TITLE  S2 NAME  S1REET ADDRESS  CITY-ST-ZIP  KINSTON AL  DELETE  6.1 TITLE  Change  Addition  Addition  Change  Addition  Addition	CITY-ST-ZIP	PANAMA CITY BEACH FL 32413	}	3.4, CITY-5	T-ZIP	DANAMA CITY BCH, FL.	<u>32413</u>			
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CITY-ST-ZIP	NAME	BOWEN, TOBBIE		4. 2 NAME						
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NAME BOWDEN, DAPHANE  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  SOUNDEN, DAPHANE  52 NAME  53 STREET ADDRESS  54 CITY-ST-ZIP  61 TITLE  Change Addition  62 NAME  83 STREET ADDRESS  63 TITLE  62 NAME  83 STREET ADDRESS	CITY-ST-ZIP	PANAMA CITY BCH. FL		4.4 CITY-S	T-ZIP					
STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  DELETE  5.3 STREET ADDRESS 5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  Change Addition 6.2 NAME 8.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 TITLE 6.2 NAME 8.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 STREET ADDRESS 6.5 STREET ADDRESS	TITLE	SD	<b>■</b> DELETE	5.1 TITLE	- 1		Change	☐ Addition		
STREET ALDRESS F. O. BOX 3 N/A  STACTIV-ST-ZIP  SACTIV-ST-ZIP  SACTIV-ST-ZIP  SACTIV-ST-ZIP  Change Addition  SAME  SACTIV-ST-ZIP  SAME  SAME  SACTIVETY ANDRESS	NAME	Bowden, Daphane		5.2 NAME	- 1					
TITLE    DELETE   6.1 TITLE   Change   Addition   NAME   6.2 NAME	STREET ADDRESS	P.O. BOX 5 N/A		5.3 STREE	r address					
TITLE G.1 TITLE G.1 TITLE G.2 NAME  NAME  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS	CITY-ST-ZIP	KINSTON AL		5.4 CITY-S	T-ZIP					
NAME 6.3 STREET ADDRESS			☐ DELETE	6.1 TITLE			Change	☐ Addition		
8.3 STDEET ADDRESS	NAME			6.2 NAME						
STREET ADDRESS	STREET ADDRESS			6.3 STREE	ADDRESS					

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.

CITY-ST-ZIP