

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N11595

1. Entity Name

MAGNOLIA HOUSE CONDOMINIUM ASSOCIATION, INC.

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90085 025 ****61.25

Principal Place of Business

480 GULF SHORE DR
DESTIN FL 32541
US

Mailing Address

114 CENTER
STE 100
LITTLE ROCK AR 72201
US

2. Principal Place of Business

3. Mailing Address

480 Gulf Shore Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Destin FL

Zip

Country

Zip

Country

32541

Oklaoma

4. FEI Number

13-3318273

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRAEMER, MARY K
727 HIGHWAY 98 EAST
DESTIN FL 32541

Name

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

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

SMITH, MARK
3311 ORLEANS DR
NASHVILLE TN 37212

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

D

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

WANNEMACHER, DAVE
BANNERMAN BEACH RD
SANTA ROSA BEACH FL 32459

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

VD

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Delete

FISHER, EARL
927 MOCKINGBIRD LANE
GRIFFIN GA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition

McLendon, James
105 Chapelwood Dr.
Franklin, TN 37069

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

HESTER, RANDY
1702 GREENWYCHE ROAD
HUNTSVILLE AL 35801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

PD

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

SEYMORE, BURK
33 EAST GEORGIA STREET
SANTA ROSA BEACH FL 32459

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

33 East Georgia Street

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/01

850-837-4800

Date

Daytime Phone #

CR2E037 (10/00)