2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002839

FILED Jan 25, 2005 Secretary of State

Entity Name: THE FOUNTAINS AT SANDESTIN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:					New Principal Place of Business:			
10221 EME SUITE 23	ERALD COAS	ST PKW						
MIRAMAR	BEACH, FL	32550	US					
Current Mailing Address:					New Mailing Address:			
10221 EME	ERALD COAS	ST PKW	/ WEST					
SUITE 23 MIRAMAR	BEACH, FL	32550	US					
FEI Number:	59-2891083	FEI No	umber Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate	e of Status Desired ()
Name and	Address of	Current	Registered Agent:		Name and	Address of	New Regi	stered Agent:
10221 EME SUITE 23	COAST ASS ERALD COAS BEACH, FL	ST PKW	ſW.					
	named entity of Florida.	submits	this statement for the p	urpose o	f changing it	ts registered	office or re	gistered agent, or both,
SIGNATUF	RE:							
	Electro	nic Sign	ature of Registered Age	nt			С	Date
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VPD (COX, FRED 8063 FOUNTA SANDESTIN,				Title: Name: Address: City-St-Zip:	VPDS (COX, FRED 8063 FOUNT, SANDESTIN,) Addition
Fitle: Name: Address: City-St-Zip:	D (HILL, JOHN 8050 FOUNTA SANDESTIN, I				Title: Name: Address: City-St-Zip:	(() Change() Addition
Title: Name: Address: City-St-Zip:	PD (RISLEY, HOL 8061 FOUNTA SANDESTIN, I	AINS LANE			Title: Name: Address: City-St-Zip:	(() Change() Addition
Title: Name: Address: City-St-Zip:	D (MOOR, GENE 8050 FOUNTA SANDESTIN, I	AINS LANE			Title: Name: Address: City-St-Zip:	D (MOOR, GENI 3315 CHERC BIRMINGHAN	KEE RD.) Addition
Title: Name: Address: City-St-Zip:	D (NG, LEAH 8072 FOUNTA SANDESTIN, I				Title: Name: Address: City-St-Zip:	(() Change() Addition
Title: Name: Address: City-St-Zip:	STD (HURLEY, PHI 8056 FOUNTA SANDESTIN, I	INS LANE			Title: Name: Address: City-St-Zip:	TD (HURLEY, PH 808 MALLOR TYLER, TX 7	Y CT.) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOLLIS RISLEY PD 01/25/2005