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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N9400003642 (5)

STERLING SANDS CONDOMINIUM OWNERS ASSOCIATION, I NC.

FILED May 20 1997 8:00am Secretary of State



Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State Zip Country Fee Required 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees Zip Country Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032,			Mailing Address				. (68219) 618 (611) atok 68219 88311 88111 88111 88111 88111 81111 81111 81111 81111 91111 91111 91111 91111				
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HALL, STEVE 1234 AIRPORT RD STE 205 DESTIN FL 32541 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the description of decrease of 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 the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the state of Florida, Statutes. 12. OFFICERS AND DIRECTIONS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 12. 16. This is a proper of the appointment as registered agent appears appe	24			30							┨
HALL, STEVE 1234 AIRPORT RD STE 205 DESTIN FL 32541 82 Streat Address (P.O. Box Number is Not Acceptable) 83 Ball		9. Name and Address of Curren	t Registered Agent		81	Namo	10. Name and Address of New Hel	isterea Agen		****	┨
11. Pursuant to the provisions of Soctions 617.0502 and 617.1508. Florids 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, Sociotical 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, Sociotical Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CITANGES TO OFTICERS AND DIRECTORS 14. ADDITIONS/CITANGES TO OFTICERS AND DIRECTORS IN 12. PD NAME HANSON, HAP 910 REDWOOD CIR 13 SIREET ADDRESS TITLE VD ACKERMAN, JANICE 14. CITY-51-2P 1612 ST ANTHONY CIR 24 SIREET ADDRESS CITY-51-2P 162 ST ANTHONY CIR 25 SIREET ADDRESS CITY-51-2P DELETE 4 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 4 TITLE Change Addition Addition NAME 4 SIREET ADDRESS CITY-51-2P Addition Change Addition		TO 5				140.130					_
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DESTIN FL 32541 11. Pursuent 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 agent. I am familiar with, and accept the obligations of Sections 617.0503. Florids Statutes, the above named 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. Florids Statutes. SIGNATURE The company of the purpose of changing its registered agent agent. I am familiar with, and accept the obligations of Section 617.0503. Florids Statutes. The company of the purpose of changing its registered agent agent. I am familiar with, and accept the obligation of Section 617.0503. Florids Statutes. The company of the purpose of changing its registered agent algebrases. The company of the purpose of changing its registered agent. The company of the purpose of changing its registered agent. The company of the ocroporation's board of directors. I hereby accept the appointment as registered agent. The purpose of changing its registered agent. The purpose of changin					83				_		┨
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12.	SIGNATURE _	Signature, typed or printed name of registered age	nt and title if applicable. (NO	TE: Registe	red Ape	nt signature requ	vired when reinstating)	DATE			
NAME				13).		ADDITIONS/CHANGES TO OF LIC	ERS AND DIR	CTORS	S IN 12	Í
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		ov cartify that the information supplies	d with this filing does not gue				ed in Section 119 07/31/i) Florida Statute	L further cert	ify that t	he	4

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.