2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUM

1. Entity Name

/IENT # N980000	05564	
SA YACHT CLUB OW	/NERS ASSOCIATION,	
of Business	Mailing Address	
OLA BEACH BLVD.	300 PENSACOLA BEACH	H BLVD.

FILED Mar 26, 2004 8:00 am Secretary of State

SANTA ROSA YACHT CLUB OWNERS ASSOCIATION, INC.				03-26-2004 900	03-26-2004 90014 022 ****70.00		
Principal Place of Business Mailing Address							
300 PENSAC GULF BREEZ	COLA BEACH BLVD. ZE FL 32561	300 PENSACOLA BEACH GULF BREEZE FL 32561	BLVD.		BBIN BBIB) BIIBE BYIN BYNE ALBI	iki ki 1981	
2. Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.		MOORE C	MOORE CR2E037 (11/03)		
City & State		City & State		4. FEI Number 59-3567436		plied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addi Fee Required		
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Regis	stered Agent		
			Name				
BURKLOW, MELVIN A 5425 OAKMONT DR PACE FL 32571		Street Address (P.O. Box Number is Not Acceptable)					
1,70	212377		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. I am familiar with, and accept the obligations of registered agent.							
,							
SIGNATURE -	Signature, typed or printed name of registered agent a	and title it applicable. (NOTE: Re	gistered Agent signatur	e required when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campa Trust Fund Con			Check Payable t Department of S		
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN	10	
TITLE	DP BURKLOW, MELVIN A	☐ Delete	TITLE		☐ Change	Addition	
NAME STREET ADDRESS	5425 OAKMONT DR		NAME STREET ADDRESS				
CITY-ST-ZIP	MILTON FL 32571		CITY-ST-ZIP				
TITLE	DV	☐ Delete	TITLE	DV	☐ Change	☐ Addition	
NAME	BURKLOW, ROBERT	TT Delete	NAME	Jack Eason	LA Change	Addition	
STREET ADDRESS	236 WOODMERE DR.		STREET ADDRESS	1174 Grand Pointe Dr.			
CITY-ST-ZIP	HOHENWALD TN 38462		CITY-ST-ZIP	Gulf Breeze, FL 32563			
TITLE	DP	☐ Delete	TITLE	ĎΤ	☐ Change	☐ Addition	
NAME	MOORE, HARRY B	·	NAME	Arnie Kendall			
STREET ADDRESS	11 E GALVEZ CT PENSACOLA FL 32561		STREET ADDRESS	2868 Bay Meadow Dr.			
CITY-ST-ZIP	DS		CITY-ST-ZIP	Gulf Breeze FL 32563	<u> </u>		
TITLE	LIVINGSTON, DAN L	☐ Delete	1111	DS	☐ Change	Addition	
NAME STREET ADDRESS	308 WILLIAMSBURG DR		NAME STREET ADDRESS	Tim Burr			
CITY-ST-ZIP	GULF BREEZE FL 32561		CITY-ST-ZIP	203 Pine Tree Dr.			
TITLE	DV	☐ Delete	TITLE	Gulf Breeze, FL 32561		☐ Addition	
NAME	BARNETT, JOHN	□ Delete	NAME	Robert Burklow	[2] Change	☐ Addition	
STREET ADDRESS	5601 CANONGATE LN		STREET ADDRESS	236 Woodmere Dr.			
CITY-ST-ZIP	BIRMINGHAM AL 35242		CITY-ST-ZIP	Hohenwald TN 33462			
TITLE	COMMEDIATE MAYO	☐ Delete	TITLE	D	☐ Change	☐ Addition	
NAME				_	<u> </u>		
	SOMMERMEYER, MAYO	Bolote	NAME	James Pewitt	<u> </u>		
STREET ADDRESS	736 HINSDALE DRIVE	L Bolos	STREET ADDRESS	James Pewitt 1265 Greenview Lane	<u> </u>		
STREET ADDRESS CITY-ST-ZIP	736 HINSDALE DRIVE FORT COLLINS CO 80526		STREET ADDRESS CITY-ST-ZIP	James Pewitt			

inguori supplied with upopining uses not quality for the exemption stated in section (1.19.0) (3)(1), Florida Statutes. Turther certify that the information implemental 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 giver or trustee ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if not with an address with all other like empowered. indicated on this report of the corporation of the

SIGNATURE

Melvin A. Burklow SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(850) 934 1005

Affectment

54022846

N98000005564

Block 11.

Change

Dan Livingston P. O. Box 12314 Pensacola FL 32591