2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004539

Entity Name: REGATTA BAY OWNERS ASSOCIATION, INC.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4460 LEGENDARY DRIVE STE 400 DESTIN, FL 32541 **Current Mailing Address: New Mailing Address:** 4460 LEGENDARY DRIVE STE 400 DESTIN, FL 32541 FEI Number: 59-3419661 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEGLER, MITCHELL W 300A WHARFSIDE WAY JACKSONVILLE, FL 32207 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BOS. PETER H BOS, PETER H JR. Name: Name: 4460 LEGENDARY DRIVE STE 400 Address: 4460 LEGENDARY DRIVE STE 400 Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: (X) Change () Addition LORENZEN, DWIGHT Name: Name: LORENZEN, DWIGHT Address: 4460 LEGENDARY DRIVE STE 400 Address: 4522 GOLF VILLA COURT #201 City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: () Change () Addition FEATHERSTON, GREG Name: Name: 4460 LEGENDARY DRIVE STE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PARKER, WENDY Name: 4460 LEGENDARY DRIVE STE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: (X) Change () Addition BUSFIELD, DAVID A BUSFIELD, DAVID A Name: Name: 4460 LEGENDARY DRIVE STE 400 4460 LEGENDARY DRIVE STE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: () Change () Addition BOS, PETER H III Name: Name: Address: 4460 LEGENDARY DR., STE 400 Address: DESTIN, FL 32541 City-St-Zip: City-St-Zip:

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: WENDY PARKER S 04/14/2004