

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755522

Entity Name: MOONDRIFTER OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8815 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408**Current Mailing Address:**8815 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US**FEI Number:** 59-2129704**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHNEIDER, JEFF
8815 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US*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**Officer/Director Detail :**

Title PRESIDENT
Name COTNER, MEREDITH
Address C/O 185 GRAND BLVD.
 UNIT 1501
City-State-Zip: MIRAMAR BEACH FL 32550

Title VP
Name WILKERSON, MARIA E
Address C/O 185 GRAND BLVD.
City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR
Name GAMBLE, BILLY
Address 505 BRUSH CREEK ROAD
City-State-Zip: KILLEN AL 35645

Title DIRECTOR
Name MAYNARD, ROBERT
Address C/O 185 GRAND BLVD.
City-State-Zip: MIRAMAR BEACH FL 32550

Title TREASURER
Name BENTLEY, TAMMY
Address 8815 THOMAS DRIVE
 UNIT 302
City-State-Zip: PANAMA CITY BEACH FL 32408

Title DIRECTOR
Name SELLERS, BRANDON
Address C/O 185 GRAND BLVD.
City-State-Zip: MIRAMAR BEACH FL 32550

I hereby 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 all other like empowered.

SIGNATURE: TAMMY BENTLEY**TREASURER****03/05/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date