

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000004539

**Entity Name:** REGATTA BAY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 HWY 20 E  
STE 312  
NICEVILLE, FL 32578

**Current Mailing Address:**

4400 HWY 20 E  
STE 312  
NICEVILLE, FL 32578 US

**FEI Number:** 59-3419661

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANDSBERGER, DARLANE  
4400 HWY 20 E  
STE 312  
NICEVILLE, FL 32578 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 P  
Name DEXTER, SAMS  
Address 505 REGATTA AY BLVD  
City-State-Zip: DESTIN FL 32541

Title S/T  
Name ED, MCMULLEN  
Address 498 REGATTA BAY BLVD  
City-State-Zip: DESTIN FL 32541

Title D  
Name BOS, PETER  
Address 3889 INDIAN TRAIL  
City-State-Zip: DESTIN FL 32541

Title DIRECTOR  
Name DOKKEN, DAVID  
Address 431 CAPTAINS CIRCLE  
City-State-Zip: DESTIN FL 32541

Title DIRECTOR  
Name GENT, CHRISTOPHER  
Address 4100 LEGENDARY DR. STE 200  
City-State-Zip: DESTIN FL 32541

*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:** DEXTER SAMS

**PRESIDENT**

**04/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date