2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005564

Entity Name: SANTA ROSA YACHT CLUB OWNERS ASSOCIATION, INC.

FILED Mar 15, 2018 Secretary of State CC2475537701

Current Principal Place of Business:

300 PENSACOLA BEACH ROAD GULF BREEZE. FL 32561-4864

Current Mailing Address:

300 PENSACOLA BEACH ROAD GULF BREEZE. FL 32561 US

FEI Number: 59-3567436 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURR, TIMOTHY 300 PENSACOLA BEACH BLVD GULF BREEZE, FL 32561 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: TIMOTHY BURR 03/15/2018

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

O'DANIEL, ANDY NICODEMUS, ROBERT E Name Name

300 PENSACOLA BEACH ROAD 300 PENSACOLA BEACH ROAD Address Address

City-State-Zip: GULF BREEZE FL 32561 GULF BREEZE FL 32561 City-State-Zip:

Title DIRECTOR Title **TREASURER**

Name HAMMETT, GREY SMITH, MARTIC R Name

Address 300 PENSACOLA BEACH ROAD Address 300 PENSACOLA BEACH ROAD

GULF BREEZE FL 32561 City-State-Zip: GULF BREEZE FL 32561 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name COOK, JAMES H Name CAMERO, LUIS

Address 300 PENSACOLA BEACH ROAD Address 300 PENSACOLA BEACH ROAD

GULF BREEZE FL 32561 City-State-Zip: GULF BREEZE FL 32561 City-State-Zip:

Title **PRESIDENT** Title **SECRETARY** Name

BURR, TIMOTHY BABIN-NEAL, ANNA Name

300 PENSACOLA BEACH ROAD Address 300 PENSACOLA BEACH ROAD Address

City-State-Zip: GULF BREEZE FL 32561 GULF BREEZE FL 32561 City-State-Zip:

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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.

03/15/2018 SIGNATURE: BABIN-NEAL, ANNA **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name LANGEN, MIKE

Address 300 PENSACOLA BEACH ROAD

City-State-Zip: GULF BREEZE FL 32561