2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005564

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

FILED Feb 25, 2016 Secretary of State CC6372666422

Current Principal Place of Business:

300 PENSACOLA BEACH BLVD. GULF BREEZE. FL 32561-4864

Current Mailing Address:

P.O. BOX 1588

GULF BREEZE. FL 32562-1588 US

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

Name and Address of Current Registered Agent:

HEBERT, RANDOLPH J 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	DIRECTOR	Title	DIRECTOR, SECRETARY
Name	O'DANIEL, ANDY	Name	NICODEMUS, ROBERT E
Address	108 S. SUNSET BLVD	Address	1139 WINDCHIME WAY
City-State-Zip:	GULF BREEZE FL 32561	City-State-Zip:	PENSACOLA FL 32503

Title DIRECTOR Title DIRECTOR

Name SMITH, MARTIC R Name HAMMETT, GREY

Address 512 EVENTIDE DR Address 7192 WOODSTOCK DR.

City-State-Zip: GULF BREEZE FL 32561 City-State-Zip: BATON ROUGE LA 70809

Title PRESIDENT Title DIRECTOR

Name HEBERT, RANDOLPH J JR. Name COOK, JAMES H
Address 288 PLANTATION HILL RD. Address 1107 ARIOLA DR.

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

Title DIRECTOR, VP Title TREASURER

Name LYNCHARD, LANE Name KENDALL, ARNOLD

Address 1402 PLAYES CLUB CIRCLE Address 10100 HILLVIEW DR

APT 322

City-State-Zip: GULF BREEZE FL 32563 City-State-Zip: PENSACOLA FL 32514

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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.

SIGNATURE: SUSAN R KLADITIS ADMIN 02/25/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name BURR, TIMOTHY
Address 604 FAIRPOINT DR

City-State-Zip: GULF BREEZE FL 32561