

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90015 031 ****61.25

DOCUMENT # 727517

1. Entity Name

SUGAR BEACH OWNER'S ASSOCIATION, INC.



Principal Place of Business

8727 THOMAS DR
PANAMA CITY FL 32408

Mailing Address

8727 THOMAS DR
PANAMA CITY FL 32408



2. Principal Place of Business - No P.O. Box #

8727 Thomas Dr.

3. Mailing Address

8727 Thomas Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

PANAMA CITY BEACH

City & State

PCB FL

4. FEI Number

59-1469171

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Timothy J. Sloan

Street Address (P.O. Box Number is not acceptable)

427 McKenzie Avenue

PANAMA CITY, Florida

City

FL

Zip Code

32408

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

2/22/08

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOORE, CHARLES
700 OLD ROSWELL LAKES PKWY, STE 220
ROSWELL GA 33076 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLARK, DAVID
909 SECOND AVENUE
COLUMBUS GA 31901 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HERNDON, JOYCE
PO BOX 6167
WARNER ROBINS GA 31095 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CURETON, ROY
PO BOX 1543
COLUMBUS GA 31902 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LAWSON, SWAN JR
2309 E DOUBLEGATE DR
ALBANY GA 31721 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DEMATTEO, TONY
608 EASTBROOK RD
ESTILL SPRINGS TN 37330 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
Alice Branning
700 Alcorn Way
Lawrenceville, GA 30043 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
PATRICIA LATHAM
2700 VIRGINIA AVE NW #707
WASHINGTON, DC 20037 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HAROLD M. KIRBY
3009 Highland Drive
Montgomery AL 36111 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
Gwy Conkey
8727 THOMAS DR. UNIT C-6
PANAMA CITY BEACH FL 32408 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] President

2/16/08

850 234 2102