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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 733702					
1. Corporation Name ISLA BLANCA TOWNHOUSE OWNERS' ASSOCIATION, INC.					
Principal Place of Business 109 HWY 98 E #D DESTIN FL 32541 US			Mailing Address P O BOX 5211 DESTIN FL 32540 US		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/02/1975	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		NOT APPLICABLE	
24 Country		29 Country		5. Certificate of Status Desired	
				☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VICKERS, WILLIAM D 109 HWY 98 E SUITE D DESTIN FL 32541				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			
				85 Zip Code			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE William D. Vickers DATE Feb 1, 99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE	PD	☒ Change	☐ Addition
NAME	MCDANIEL			1.2 NAME	MCDANIEL, JIM		
STREET ADDRESS	P O BOX 797 N/A			1.3 STREET ADDRESS	P O BOX 797		
CITY-ST-ZIP	CLANTON AL 35046			1.4 CITY-ST-ZIP	CLANTON, AL 35046		
TITLE	VP	☐ DELETE		2.1 TITLE	D	☒ Change	☐ Addition
NAME	DUNKLIN, NANCY			2.2 NAME	DUNKLIN, NANCY		
STREET ADDRESS	300 JEFFMAR ST			2.3 STREET ADDRESS	501 BALACLAVA DRIVE		
CITY-ST-ZIP	GREENVILLE AL 36037			2.4 CITY-ST-ZIP	GREENVILLE, AL 36037		
TITLE	ST	☒ DELETE		3.1 TITLE	VP	☐ Change	☒ Addition
NAME	JACK KINARD			3.2 NAME	SPARROW, GEORGE		
STREET ADDRESS	2509 PELHAM DR			3.3 STREET ADDRESS	719 W. LANIER AVE., SUITE B		
CITY-ST-ZIP	HOUSTON TX 77019			3.4 CITY-ST-ZIP	FAYETTEVILLE, GA 30214		
TITLE	D	☒ DELETE		4.1 TITLE	D	☐ Change	☒ Addition
NAME	MCTYIER, SALTER			4.2 NAME	THOMAS, ELIZABETH		
STREET ADDRESS	183 JOHNSON ST SE			4.3 STREET ADDRESS	67 VANDERBILT PLACE		
CITY-ST-ZIP	DAWSON GA 31742			4.4 CITY-ST-ZIP	HOUSTON, TX 77005		
TITLE		☐ DELETE		5.1 TITLE		☐ Change	☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM MCDANIEL SIGNATURE REQUIRED: JIM MCDANIEL, PRESIDENT Date: 2/1/99 Daytime Phone #: (205) 688-2583

CR2E037 (11/98)