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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:38

DOCUMENT # 755921 (4)

1. Corporation Name
SANDESTIN OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4701 OLD HIGWAY 98 SUITE C-102B DESTIN FL 32541 US	P.O. BOX 6417 DESTIN FL 32541 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/16/1981
3a. Date of Last Report: 01/25/1994
4. FEI Number: 59-2128993 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes XX Yes ☐ No

2. Principal Place of Business (21): 1096 Old Highway 98
Suite, Apt. #, etc. (22): Suite C-102B
City & State (23): Destin FL 32541
Zip (24): Country (25):

2a. Mailing Address (26):
Suite, Apt. #, etc. (27):
City & State (28):
Zip (29): Country (30):

9. Name and Address of Current Registered Agent

FEATHERSTON, GREG
4701 OLD HIGWAY 98, SU. C-102B
DESTIN FL 32541

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 1096 Old Highway 98, Su. C-102B
83:
84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: [signature] Greg Featherston 1-24-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE		☒ Change ☐ Addition
NAME	RESTER, JIM	1.2 NAME		
STREET ADDRESS	4701 HIGHWAY 98 EAST	1.3 STREET ADDRESS	9300 Highway 98 West	
CITY-ST-ZIP	DESTIN FL	1.4 CITY-ST-ZIP	Destin FL 32541	
TITLE	DT	2.1 TITLE		☒ Change ☐ Addition
NAME	ASKEW, VANCE	2.2 NAME		
STREET ADDRESS	5400 HIGHWAY 98 EAST	2.3 STREET ADDRESS	9300 Highway 98 West	
CITY-ST-ZIP	DESTIN, FL 00000	2.4 CITY-ST-ZIP	Destin FL 32541	
TITLE	DVP	3.1 TITLE		☒ Change ☐ Addition
NAME	PATTON, TOM	3.2 NAME		
STREET ADDRESS	5400 HIGHWAY 98 EAST	3.3 STREET ADDRESS	9300 Highway 98 West	
CITY-ST-ZIP	DESTIN, FL 00000	3.4 CITY-ST-ZIP	Destin FL 32541	
TITLE	D	4.1 TITLE	DS	☒ Change ☐ Addition
NAME	MORRIS, HARRY	4.2 NAME	Oden, Barry	
STREET ADDRESS	411 LINKSIDE/SANDESTIN	4.3 STREET ADDRESS	9300 Highway 98 West	
CITY-ST-ZIP	DESTIN FL	4.4 CITY-ST-ZIP	Destin FL 32541	
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	MCGEGEE, JAMES	5.2 NAME		
STREET ADDRESS	675 OAKLEAF OFFICE LANE, SUITE 102	5.3 STREET ADDRESS		
CITY-ST-ZIP	MEMPHIS TN	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	D	☒ Change ☐ Addition
NAME	DERFLER, FRANK	6.2 NAME	Brown, Bill	
STREET ADDRESS	1155 TROON DRIVE	6.3 STREET ADDRESS	5294 Tivoli	
CITY-ST-ZIP	DESTIN FL	6.4 CITY-ST-ZIP	Destin FL 32541	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] Jim Rester, President 1-24-95 904-267-8111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0021363

SANDESTIN OWNERS ASSOCIATION, INC.
DOCUMENT # 755921

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12. Officers and Directors

Addition: D
Shoemaker, Hal
1453 Baytowne Avenue
Destin, FL 32541