2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 14, 2004 8:00 am Secretary of State **DOCUMENT # 756188** 1. Entity Name 04-14-2004 90078 023 ****61.25 DUNES OF PANAMA MANAGEMENT ASSOCIATION, INC. Principal Place of Business : Mailing Address 7205 THOMAS DRIVE 7205 THOMAS DRIVE BLDG C BLDG C · . . ii . . PANAMA CITY BEACH FL 32408 PANAMA CITY BEACH FL 32408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2050149 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MYNARD, JEFF D Street Address (P.O. Box Number is Not Acceptable) 7205 THOMAS DRIVE BLDG C PANAMA CITY BEACH FL 32407 City Zio Code 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS ☐ Delete DUSIUN, ED TITLE Title **X** Change ☐ Addition DUSKIN, EDGAR NAME NAME POBOX 7000 65 COVENTRY STREET ADDRESS STREET ADDRESS Dawson, GA 39842 TUSCALOOSA AL 35404 CITY-ST-ZIP CITY-ST-ZIP SENNETT CHANCES Change TITLE ☐ Delete TITLE Addition BENNETT, CHARLES NAME NAME PU BOX 535 PO BOX 535 STREET ADDRESS STREET ADDRESS HARDNSBURG KY 40143 HARDINSBURG KY 40143 CITY-ST-ZIP CITY-ST-7(P TITLE ☐ Delete TITLE Change Addition FURLOUGH, ROBERT NAME NAME 228 ROSEHILL DR. NORTH STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32312 CITY-ST-ZIE CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition TITLE HOSAN, DON HOGAN, DON 2433 THOMAS DR. BOX109 NAME NAME 7151 W. HWY 98 #145 STREET ADDRESS STREET ADDRESS PANAMA CITY BEACH, FG32408 PANAMA CITY FL 32408 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition BURG, TOM NAME NAME 7565 KINSELLA CT STREET ADDRESS STREET ADDRESS **DUNWOODY GA** CITY-ST-ZIP *3035*0 CITY-ST-ZIP ☐ Change TITLE TITI F ☐ Delete ☐ Addition MAJORS, PEGGY NAME NAME 102 N. MAIN STREET STREET ADDRESS STREET ADDRESS CANEYVILLE KY 42721 CITY-ST-ZIP CITY-ST-7IP

12. Thereby 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 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 true elegal empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted or on an attachment with a fidness, withhall other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER O

changed, or on an attachment

SIGNATUREAND

SIGNATURE:

FILED