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Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757677 (0)

1. Corporation Name

SURF 'N' SAND OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7816 SURF DRIVE
PANAMA CITY BCH. FL 324087816 SURF DRIVE
PANAMA CITY BCH. FL 32408-75113. Date Incorporated or Qualified
04/22/19813a. Date of Last Report
02/07/19964. FEI Number
59-2930851Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALDRIDGE, MARIE
5400 HILLTOP AVE.
PANAMA CITY BCH. FL 32408

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

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 P ☐ DELETE
NAME MINOTE, PHILIP
STREET ADDRESS 132 SANDOLLAR DR.
CITY-ST-ZIP PANAMA CITY BCH. FL1.1 TITLE ☒ Change ☐ Addition
1.2 NAME Minote Philip
1.3 STREET ADDRESS 132 Sandollar Dr.
1.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME COSTLEY, GORDON
STREET ADDRESS 15325 FRONT BCH RD
CITY-ST-ZIP PANAMA CITY BCH FL 324082.1 TITLE ☐ Change ☒ Addition
2.2 NAME V.P. John E. White
2.3 STREET ADDRESS 7530 Bridgegate Ct.
2.4 CITY-ST-ZIP Dunwoody, Ga. 30338TITLE D ☐ DELETE
NAME SHELNUIT, PAT
STREET ADDRESS 1909-7 ST. W.E.
CITY-ST-ZIP BIRMINGHAM AL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE ST ☐ DELETE
NAME MINOTE, PEGGY
STREET ADDRESS 132 SAN DOLLAR DR.
CITY-ST-ZIP PANAMA CITY BCH. AL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME SLADE, MARK
STREET ADDRESS 100 W. CHRISTOPHER RUN
CITY-ST-ZIP ALPHARETTA GA5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME ROUBEN, H.P.
STREET ADDRESS 2742 KINGS PARK CIRCLE
CITY-ST-ZIP DECATUR GA6.1 TITLE ☒ Change ☐ Addition
6.2 NAME Pres. Rouben, H.P.
6.3 STREET ADDRESS 222 Sunset Hills Dr.
6.4 CITY-ST-ZIP Worems, Ga. 30071

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Marie Aldridge, Reg. Ag. 1/12/97 904-234-7345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 4000000000

CR2E037 (9/96)