

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757677

1. Entity Name

SURF 'N' SAND OWNERS ASSOCIATION, INC.

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90188 020 ****61.25

Principal Place of Business

Mailing Address

7816 SURF DRIVE
PANAMA CITY BCH. FL 32408

7816 SURF DRIVE
PANAMA CITY BCH. FL 32408

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2930851

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

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME WHITE, JOHN E. ☐ Delete
STREET ADDRESS 501 DOLRYMPLE DRIVE
CITY-ST-ZIP ATLANTA GA 30328

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

TITLE D
NAME COSTLEY, KATHLEEN ☐ Delete
STREET ADDRESS PO BOX 14153
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

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

TITLE D
NAME SHELNUTT, PAT ☐ Delete
STREET ADDRESS 1448 BREWSTER CIRCLE
CITY-ST-ZIP BIRMINGHAM AL 35235

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

TITLE ST
NAME HINOTE, PEGGY ☐ Delete
STREET ADDRESS 132 SAN DOLLAR DR.
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

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

TITLE D
NAME SLADE, MARK ☐ Delete
STREET ADDRESS 1990 LONG HOLLOW LANE
CITY-ST-ZIP ALPHARETTA GA 30201

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

TITLE VP
NAME ROUBEN, H.P. ☐ Delete
STREET ADDRESS 222 SUNSET HILLS DR
CITY-ST-ZIP WORCROSS GA

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

12. 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 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: *Peggy Hinote* 3/5/02 8:50 234-2831
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)