2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758846

FILED Jan 22, 2004 Secretary of State

Entity Name: THE FAIRWAYS AT SANDESTIN HOMEOWNERS ASSOCIATIONING.

Current Principal Place of Business:				New Principal Place of Business:			
10221 HIGH SUITE 23 DESTIN, FL	HWAY 98 W - 32550 US	1					
Current Mailing Address:				New Mailing Address:			
10221 EMERALD COAST PKWY, W SUITE 23 DESTIN, FL 32550							
FEI Number:	59-2133467	FEI Number Applied For ()	FEI Numi	ber Not Appli	cable ()	Certificate of Statu	s Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered A	Agent:
GELDER, JAY B EMERALD COAST ASSOCIATION MGMT 10221 EMERALD COAST PARKWAY, W, STE. 23 DESTIN, FL 32550 US							
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:							
Electronic Signature of Registered Agent						Date	_
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFFICERS A	ND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () I WILLIAMS, SHIR 8684 SOUTHWIN MEMPHIS, TN 3	NDS DRIVE	1	Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () DONWEN, BILL 5715 PRESTON DALLAS, TX 75		1	Title: Name: Address: City-St-Zip:	MORGAN, JIM) Change ()Addition 9 US HWY 98 W L 32550	
Title: Name: Address: City-St-Zip:	SD () COPE, SHIRLEY 25 ROCK CRES' SIGNAL MOUNT	T DR	1	Title: Name: Address: City-St-Zip:	SD (X) HATTAWAY, PA 256 EAGLE DR SANDESTIN, FL	. .	
Title: Name: Address: City-St-Zip:	TD () BERBERICH, BII 1526 ISLAND GF DESTIN, FL 325	REEN DR.	1	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () FITZ-HUGH, TUC 210 BARONNE S NEW ORLEANS,	ST, S-1700	1	Title: Name: Address: City-St-Zip:	()) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TUCKER FITZ-HUGH PD 01/22/2004