2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758846

FILED Apr 07, 2008 Secretary of State

Entity Name: THE FAIRWAYS AT SANDESTIN HOMEOWNERS ASSOCIATIONING.

Current Principal Place of Business: New Principal Place of Business: 10221 HIGHWAY 98 W SUITE 23 DESTIN, FL 32550 **New Mailing Address: Current Mailing Address:** 10221 EMERALD COAST PKWY, W SUITE 23 DESTIN, FL 32550 FEI Number: 59-2133467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WILLIAMS, SHIRLEY BLANKENSHIP, JANE Name: Name: 8684 SOUTHWINDS DRIVE Address: 184 COVE DRIVE Address: City-St-Zip: MEMPHIS, TN 38125 City-St-Zip: SANDESTIN, FL 32550 Title: () Delete Title: (X) Change () Addition MURRELL, JEFF Name: MURRELL, JEFF Name: Address: 10090 PALASADE RIDGE DRIVE Address: 10090 PALASADE RIDGE DRIVE City-St-Zip: COLORADO SPRINGS, CO 80920 City-St-Zip: COLORADO SPRINGS, CO 80920 Title: () Delete Title: PD (X) Change () Addition HATTAWAY, PAM HATTAWAY, PAM Name: Name: Address: 256 EAGLE DR. Address: 256 EAGLE DR. City-St-Zip: SANDESTIN, FL 32550 City-St-Zip: SANDESTIN, FL 32550 Title: VPD () Delete Title: () Change () Addition Name: HOVER, DAN Name: 238 AUDUBON DRIVE Address: Address: City-St-Zip: SANDESTIN, FL 32550 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition FITZ-HUGH, TUCKER BROWN, MARTIN Name: Name: 210 BARONNE ST, S-1700 5522 FIESTA DRIVE Address: Address: City-St-Zip: NEW ORLEANS, LA 70112 City-St-Zip: MEMPHIS, TN 38120

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PAM HATTAWAY PD 04/07/2008