2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State
01-27-2003 90526 039 ****61.25

DOCUMENT # 758846

1. Entity Name

THE FAIRWAYS AT SANDESTIN HOMEOWNERS ASSOCIATION INC.

Principal Place of Business	Mailing Address
10221 HIGHWAY 98 W SUITE 23 DESTIN FL 32550 US	10221 HIGHWAY 98 W SUITE 23 DESTIN FL 32550 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip | Country

3. Mailing Address

The Post Office changed our physical address to
10221 Emerald Coast Pkwy, W
Suite 23
Destin, FL 32550

4. FEI Number 59-2133467 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GELDER, JAY B
EMERALD COAST ASSOCIATION MGMT
10221 HWY 98 WEST STE 23
DESTIN FL 32550

7. Name and Address of New Registered Agent

Name

Street Address

The Post Office changed our physical address to
10221 Emerald Coast Pkwy, W
Suite 23
Destin, FL 32550

City | 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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMS, SHIRLEY 8684 SOUTHWINDS DRIVE MEMPHIS TN 38125	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DONWEN, BILL 5715 PRESTON FAIRWAYS DR DALLAS TX 75252	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COPE, SHIRLEY 25 ROCK CREST DR SIGNAL MOUNTAIN TN 37377	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BERBERICH, BILL 1526 ISLAND GREEN DR. DESTIN FL 32541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FITZ-HUGH, TUCKER 210 BARONNE ST, S-1700 NEW ORLEANS LA 70112	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED 1/17/03