FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Apr 23 1998 8:00am Secretary of State

SUGAH SANDS TOWN HOMES ASSOCIATION, INC.					
Principal Place of Business		Mailing Address	Mailing Address		rasiri sansi bilin albus irini dibi dibit bibit bibit bibit bibit bibit
14239 PERDIDO KEY DR. PENSACOLA FL 32507		14239 PERDIDO KEY DR. PENSACOLA FL 32507			3. Date Incorporated or Qualified 08/04/1981
					4. FEI Number Applied For
2. Principal P	Place of Business	2a. Mailing Address			59-3192635 Not Applicable
21		26	26		5. Certificate of Status Desired S8.75 Additional Fee Required
		Suite, Apt. #, etc.), Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22		City & State			Trust Fund Contribution Added to Fees
23 28		— ·			7. Is this nonprofit corporation a homeowners association?
Zip			T Cou	ntry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Cur		1001		10. Name and Address of New Registered Agent
				B1 Name	
TAYLOR	TAYLOR, JAMES C.				ddress (P.O. Box Number is Not Acceptable)
4300 BAYOU BLVD.				82 Street Ac	udiess (P.O. Box Number is Not Acceptable)
PENSACOLA FL 32513				83	VI-100
				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 signature re-	quired when reinstating) DATE
12.	D OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	GRIFFIN, GLENN R	_ otten	1.1 TI	ſ	LJ Change L_ Addition
STREET ADORESS	14239 PERDIDO KEY DR.		1.2 N	·	
	PENSACOLA FL			REET ADDRESS	
CITY-ST-ZIP TITLE	D	DELETE	2.1 Tr	TY-ST-ZIP	Change Addition
NAME	GRIFFIN, JOHNNIE R	_ becel	2.2 N/		☐ Onange ☐ Rudillott
STREET ADORESS	14239 PERDIDO KEY DR.			REET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL			TY-ST-ZIP	
TITLE	D	DELETE	3.1 7		Change Addition
NAME	LANIER, HERB		3.2 N/		
STREET ADORESS	14405 INNERANITY RD.			REET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32507			TY-ST-ZIP	
TITLE		☐ DELETE	4 1 T)		☐ Change ☐ Addition
NAME			4.2 N	AME	
STREET ADDRESS			4 3 ST	REET ADDRESS	
CITY-ST-ZIP			4.4 Ci	ry-St-ZiP	
TITLE		☐ DELETE	5.1 TI		☐ Change ☐ Addition
NAME			5.2 N	ME	
STREET ADDRESS			5.9 \$1	REET ADDRESS	
CITY-ST-ZIP			5.4 CI	Y-ST-ZIP	
TITLE		DELETE	6.1 TI	LE	☐ Change ☐ Addition
NAME			6.2 N/	ME	
STREET ADDRESS			6.3 \$1	REET ADDRESS	
CITY-ST-ZIP			6.4 Cf	Y-ST-ZIP	

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 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 efficiency of the corporation of the corporation or the receiver or trustee efficiency or trust

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