2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 20, 2000 8:00 am
Secretary of State
07-20-2000 90025 007 ****61.25

DOCUMENT # 761173

1. Entity Name

INDIAN BAYOU OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
COUNTRY CLUB DR EAST P O BOX 1208 DESTIN FL 32540-1208	COUNTRY CLUB DR EAST P O BOX 1208 DESTIN FL 32540-1208

DO NOT WRITE IN THIS SPACE

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 59-2201349 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LOUIS K MCMILLAN
59 COUNTRY CLUB DR E
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name: LOUIS K. MCMILLAN, JR
Street Address (P.O. Box Number is Not Acceptable): 59 COUNTRY CLUB DR. E.
City: DESTIN, FL
FL Zip Code: 32541

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: L. K. McMillan, JR SD — 7/16/00
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
After September 13, 2000 min. will be $236.25

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	~~PD~~	☐ Delete	TITLE	PD	☒ Change ☐ Addition
NAME	~~BOS, PETER H~~		NAME	LINK, JAMES F.	
STREET ADDRESS	~~110 INDIAN BAYOU DR~~		STREET ADDRESS	15 WEEKENACHEE CR.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	~~VD~~	☐ Delete	TITLE	VD	☒ Change ☐ Addition
NAME	~~SAYRE, CYNTHIA~~		NAME	O'NEAL, MASTON E.	
STREET ADDRESS	~~47 COUNTRY CLUB DR. EAST~~		STREET ADDRESS	80 INDIAN BAYOU DR.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	~~TD~~	☐ Delete	TITLE	TD	☒ Change ☐ Addition
NAME	~~HUDSON, AMES~~		NAME	HIBBS, JOHN	
STREET ADDRESS	~~29 INDIAN BAYOU DR.~~		STREET ADDRESS	16 INDIAN BAYOU DR.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	~~S~~	☐ Delete	TITLE	~~SD~~ SD	☒ Change ☐ Addition
NAME	~~LOUIS K MCMILLAN JR~~		NAME	~~LOUIS~~ LOUIS K. MCMILLAN, JR.	
STREET ADDRESS	~~59 COUNTRY CLUB DRIVE E~~		STREET ADDRESS	59 COUNTRY CLUB DR E.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	~~SD~~	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	~~BOE, ROBERT~~		NAME	ALLEN, NANCY	
STREET ADDRESS	~~145 COUNTRY CLUB DR. WEST~~		STREET ADDRESS	93 COUNTRY CLUB DR. W.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	
TITLE	~~SCD~~	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	~~BLACK, BOB~~		NAME	GALATI, JENNIFER	
STREET ADDRESS	~~106 INDIAN BAYOU DRIVE~~		STREET ADDRESS	06 ~~OK~~ PAHOKEE LN.	
CITY-ST-ZIP	~~DESTIN FL 32541~~		CITY-ST-ZIP	DESTIN, FL 32541	

CR2E037 (5/00)

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: L. K. McMillan, JR SD — 7/16/00 — 850-650-0022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment #7 6/11/73
DD73232

SECTION II CONTINUED

☒ ADDITION

TITLE - D
NAME - BEINKEMPER, JAMES A.
ST ADD - 04 COUNTRY CLUB DR. E.
CTY-ST-ZIP - DESTIN, FL 32541