

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767830

FILED
Mar 21, 2004
Secretary of State**Entity Name:** SAND CASTLES OF PANAMA CITY BEACH OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4119 ORIOLE DR
PANAMA CITY BEACH, FL 32408 US**New Principal Place of Business:****Current Mailing Address:**21603 SUNSET AVE.
PANAMA CITY BEACH, FL 32413 US**New Mailing Address:****FEI Number:** 59-2430928**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PAYNE, JERRY
21603 SUNSET AVE.
PANAMA CITY BEACH, FL 32413 US**Name and Address of New Registered Agent:**

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:**Title:** STD () Delete
Name: PAYNE, JERRY
Address: 21603 SUNSET AVE.
City-St-Zip: PANAMA CITY BEACH, FL**Title:** VD () Delete
Name: SWICORD, J.D.
Address: 803 S. COLLIER ST
City-St-Zip: BAINBRIDGE, GA 31717**Title:** PD () Delete
Name: SWAIN, WILLIAM
Address: 2573 LESLIE CIR
City-St-Zip: ATLANTA, GA**Title:** D () Delete
Name: MOORE, ROBERT K
Address: 7609 CHADWELL RD SW
City-St-Zip: HUNTSVILLE, AL**Title:** D () Delete
Name: LANDERS, DOUG
Address: 212 VAN NESS
City-St-Zip: PEACHTREE CITY, GA 30269**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: SWICORD, J.D.
Address: 803 S. COLLIER ST
City-St-Zip: BAINBRIDGE, GA 31717**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VD (X) Change () Addition
Name: LANDERS, DOUG
Address: 212 VAN NESS
City-St-Zip: PEACHTREE CITY, GA 30269

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: JERRY R PAYNE

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03/21/2004

Electronic Signature of Signing Officer or Director

Date