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

Mailing Address 8575 GULF BLVD.

NAVARRE FL 32566

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

## DOCUMENT # N0000003590

1. Entity Name

8575 GULF BLVD. NAVARRE FL 32566

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

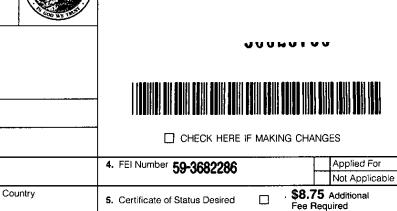
Zip

## SUMMERWIND CONDOMINIUM OWNERS ASSOCIATION, INC.



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90070 011 \*\*\*\*61.25



7. Name and Address of New Registered Agent

Name **DESTIN RESORTS** Street Address (P.O. Box Number is Not Acceptable) 321 HWY 98 E **DESTIN FL 32541** 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

Country

6. Name and Address of Current Registered Agent

(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.	D. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE '	P	☐ Delete	TITLE	Director	' a D ]	Change	<b>∑</b> X∆ddition
NAME	FEDDECK, RICHARD A		NAME	Justine Set	zerigen		,
STREET ADDRESS	P.O. BOX 545		STREET ADDRESS	102 BOX 102			{
CITY-ST-ZIP	MANDEVILLE LA 70470		CITY-ST-ZIP	Hendersomi	JU, TN 37	707	
TITLE	V	Delete	TITLÉ	Director_		Change	☐ Addition
NAME .	JURNEY, WILLIAM	<b>/</b>	NAME	William Jur	rey		}
STREET ADDRESS	5414 SEAN WAY		STREET ADDRESS	5414 Sean	way	ıl	ſ
CITY-ST-ZIP	LAWRENCEVILLE GA 30044	سپسه ج رسد	CITY-ST-ZIP 5-	William Jur 5414 Sean Lawrencuil	U16A-3004	4	
TITLE	D .,	Delete	TITLE	IV P.		☐ Change	Addition
NAME	FOSHEE, KEITH		NAME	Henry Tyler 130 Citation	C-4-		
STREET ADDRESS	P.O. BOX 454		STREET ADDRESS	130 CITALON	, CE ,		
CITY-ST-ZIP	CULLMAN AL 35058		CITY-ST-2IP	Birmingham,	J 35209		
TITLE	\$	☐ Delete	TITLE	J		Change	☐ Addition
NAME	LIGHT, HAL		NAME				}
STREET ADDRESS	265 MAPLEDALE TRAIL		STREET ADDRESS				
CITY-ST-ZIP	SHARSBURG GA 30277		CITY-ST-ZIP				
TITLE	T	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	STEWART, WAYNE		NAME				Ì
STREET ADORESS	24 RAMBLEWOOD DR		STREET ADDRESS				ſ
CITY-ST-ZIP	SILVER CREEK GA 30173		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE			Change	☐ Addition
NAME	HILBURN, RON		NAME				
STREET ADDRESS	6103 TREE CROSSING PKWY		STREET ADDRESS				Į.
CITY-ST-ZIP	BIRMINGHAM AL 35244		CITY-ST-ZIP				

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 of the corporation or the siver 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