

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90365 033 ****61.25

DOCUMENT # N00000008209

1. Entity Name
DEL MAR AT SANDESTIN HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**215 GRAND BLVD.
SUITE 200
MIRAMAR BEACH, FL 32550 US**

Mailing Address
**215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US**

60043706

2. Principal Place of Business
12273 U.S. HWY 98
Suite, Apt. #, etc.
208

3. Mailing Address
12273 U.S. HWY 98
Suite, Apt. #, etc.
208

City & State
DESTIN, FL

Zip
32550

Country
US



01092006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3698624

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**GORMLEY, TERRY P
215 GRAND BLVD.
SUITE 200
MIRAMAR BEACH, FL 32550**

7. Name and Address of New Registered Agent
Name
WALTER D. SCOTT
Street Address (P.O. Box Number is Not Acceptable)
12273 U.S. HWY 98
SUITE 208
City
DESTIN FL Zip Code
32550

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 DATE **January 9, 2006**

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25**
Due by **May 1, 2006**

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	DV DODSON, TOM 1804 BAYTOWNE AVE N MIRAMAR BEACH, FL 32550 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Terry Jones 1808 Del Mar Court Destin, FL 32550 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STEVENS, RODNEY 3806 INDIAN TRAIL DESTIN, FL 32541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Tom Dodson 1804 Baytown Ave N Miramar Beach, FL 32550 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOODMAN, BRANT 4104 GREENBRIER DR UNIVERSITY PARK, TX 75225 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Ratty Miller 7919 Fairdale Houston, TX 77063 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BREED, JOHN 1805 BAYTOWNE AVE N MIRAMAR BEACH, FL 32550 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: DATE **3/31/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR