


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90010 032 ****61.25

DOCUMENT # N01000002651 1. Entity Name SAND CLIFFS GULF SIDE ALLIANCE, INC.					
Principal Place of Business 309 SAND CLIFFS DR PANAMA CITY BEACH, FL 32413			Mailing Address 309 SAND CLIFFS DR PANAMA CITY BEACH, FL 32413		
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 59-3716982	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GOLDBERG, KENNETH D 3092 W CR 30A SANTA ROSA BEACH, FL 32459			7. Name and Address of New Registered Agent Name GOLDBERG, KENNETH D. Street Address (P.O. Box Number is Not Acceptable) 11 SNAPPER STREET City SANTA ROSA BEACH FL Zip Code 32459		
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 <u>KENNETH D. GOLDBERG</u> <u>Kenneth D. Goldberg</u> <u>2/18/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D HALL, ART 169 WALTON BUENA VISTA PANAMA CITY BCH, FL 32413 <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	P ELMORE, WAYNE 309 SAND CLIFFS DR PANAMA CITY BCH, FL 32413 <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	VP MC SHERRY, RICHARD 25 WALTON BONITA DR PANAMA CITY BEACH, FL 32413 <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	S MCCLENNY, WALTER 151 WALTON BUENA VISTA DR PANAMA CITY, FL 32413 <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	T MCCLARY, DAN 175 SAND CLIFFS DR PANAMA CITY, FL 32413 <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	D EPPE, ED 240 SAND CLIFFS DR PANAMA CITY, FL 32413 <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 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: <u>Paul W. Elman</u> <u>2/14/04</u> <u>850-872-4265</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

Attachment

#NO1000002651

10. OFFICERS AND DIRECTORS

Title D
Name Hodges, Hugh
Street Address 110 Pony Circle
City-St-Zip Thomasville, GA 31792

Title D
Name Dennis, Everett J.
Street Address 169 Sand Cliffs Drive
City-St-Zip Panama City Beach, FL 32413

Title D
Name Glenn, Phillip A.
Street Address 338 Sand Cliffs Drive
City-St-Zip Panama City Beach, FL 32413

Title D
Name Hurst, Janet
Street Address 1129 Forest Road
City-St-Zip Niceville, FL 32579

Title D
Name Harden, Bob
Street Address 207 Sand Cliffs Drive
City-St-Zip Panama City Beach, FL 32413

Please delete the following:

Title D
Name Jones, Dewey H. III
Street Address 3456 Wastbury Road
City-St-Zip Birmingham, AL 35223