2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State
05-19-2002 90234 039 ****61.25

DOCUMENT # N01000004025

1. Entity Name

THE TRANQUIL SHORES HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business	Mailing Address
P.O. BOX 2105 SANTA ROSA BEACH FL 32459	P.O. BOX 2105 SANTA ROSA BEACH FL 32459

37405

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
29 Tranquil Way	PO Box 611438
Suite, Apt. #, etc.: Seacrest Beach, Fl	Suite, Apt. #, etc.: Rosemary Beach, Fl
City & State: 32413	City & State: 32461
Zip / Country: US	Zip / Country: US

4. FEI Number: 59-3618685 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCGILL, ROBERT E III,ESQ 36008 EMERALD COAST PKWY, STE 301 DESTIN FL 32541	Name: Charles A. Webb Street Address (P.O. Box Number is Not Acceptable): 29 Tranquil Way City: Seacrest Beach FL Zip Code: 32413

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: Charles A. Webb D 4-29-02
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	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Charles A. Webb 29 Tranquil Way Seacrest Beach, Fl 32413 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Terri Hardaway 29 Tranquil Way Seacrest Beach, FL 32413 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lisa Cain 965 Hewett Road Defuniak Springs, FL 32433 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (9/01)

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: Charles A. Webb Charles A. Webb 4-29-02 850-231-1707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #