2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004044

SCUPIN, DAN

310 OVERLOOK DRIVE

DESTIN, FL 32550

Name:

Address:

City-St-Zip:

FILED Apr 19, 2004 Secretary of State

Entity Name: MIRAMAR BAYSHORE ALLIANCE, INC. **Current Principal Place of Business: New Principal Place of Business:** 310 OVERLOOK DRIVE DESTIN, FL 32550 **Current Mailing Address: New Mailing Address:** 310 OVERLOOK DRIVE DESTIN, FL 32550 FEI Number: 59-3724209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCUPIN, DAN 310 OVÉRLOOK DR DESTIN, FL 32550 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CROZIER, MARGARET Name: Name: Address: 172 BAYSHORE DRIVE Address: City-St-Zip: DESTIN, FL 32550 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: TANNER, JO Name: Address: 146 BAYSHORE DRIVE Address: City-St-Zip: DESTIN, FL 32550 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DAN SCUPIN **TREA** 04/19/2004