FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N01842

(6)

FILED May 05 1998 8:00am Secretary of State

DESTIN BEACH CLUB OWNERS ASSOCIATION, INC.									
Principal Place	e of Business	Mailing Address				4 reastion dii dolbi scan iniii dibis ishi d	ISBU DISK DIBUS GIDDI S	ilott esati 1004	
1150 HWY 98 EAST 1150 HWY 98 EAST DESTIN FL 32541 DESTIN FL 32541						3. Date Incorporated or Qualified 03/08/1984 4. FEI Number		pplied For	
6 Diselect P		S. SANGER AND S.				59-2458838		ot Applicable	
21						5. Certificate of Status Desired	Fee R	\$8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. 22		Suite, Apt. #, etc.	. W , 8(C,			6. Election Campaign Financing Trust Fund Contribution	\$5.00 D Added 1		
City & State		City & State	City & State			7. Is this nonprofit corporation a home			
23		28			Yes No				
Zip			Country			8. This corporation owes or has pald the current year Intangible			
24	25	[29]	30			Personal Property Tax due June 30.		No	
	9. Name and Address of Curre	nt Registered Agent		1 Name		10. Name and Address of New Regist	ared Agent		
DIRDIVE	I EC W		Ĺ						
BURKE, LES W 303 MAGNOLIA AVENUE			8:	2 Street	t Addre	ess (P.O. Box Number Is Not Acceptable)			
PANAMA CITY FL			8	3			· · · · · · · · · · · · · · · · · · ·		
			8.	City			85 Zip	Code	
							FL '		
11. Pursuant I	to the provisions of Sections 617.05 egistered agent, or both, in the State	02 and 617,1508, Florida Statut e of Florida, Such change was a	es, the abo	ve-named	d corpo	oration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing i	its registered registered	
agent. I ar	m familiar with, and accept the oblig	pations of, Section 617.0503, Fi	orida Statuti	98.		.,			
SIGNATURE _	Signature, typed or printed name of registered ag	nent and title if annicable (NOT	F: Registered A	nent signatur	ra reco dre-	d when reinstating) E	DATE		
12.		ID DIRECTORS	13.	gord and raise	- v require	ADDITIONS/CHANGES TO OFFICERS		RS IN 12	
TITLE	10	☐ DELETE	1.1 TITLE				☐ Change	Addition	
NAME	BROSS, HAROLD		1.2 NAM	:]				
STREET ADDRESS	37 ROSEDOWN		1.3 STRE	et address					
CITY-ST-ZIP	DESTREHAN LA	A DELETE	1.4 CITY-		 			ad Address	
TITLE [D D	X) DELETE		2.1 TITLE			☐ Change	X Addition	
NAME STREET ADDRESS	EARP, O. K JR. PRESS 950 RIDGEWAY LOOP RD., SUITE 101					ob Wilder			
CITY+ST-ZIP	MEMPHIS TN	SOILE IOI	2.4 CITY			443 Dell Glade Driv	ve		
TITLE	8	DELETE	3.1 TITLE		17	emphis, TN_38111	Change	Addition	
NAME	MCKAY, GERI		3.2 NAME	3.2 NAME					
STREET ADDRESS	1138 MAYNARD DRIVE		3.3 STRE	3.3 STREET ADDRESS					
City-St-Zip	INDIANAPOLIS IN 46227		_	3.4. CITY-ST-ZIP					
TITLE	VP	K] DELETE		4.1 TITLE			L Change	Addition	
NAME	KNIGHT, JOE			4. 2 NAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP	PD DELETE		4.4 CITY- 5.1 TITLE	4.4 CITY - ST - ZIP			Change	Addition	
NAME	SANDEL, LARRY		5.2 NAME				Onlingo		
STREET ADDRESS				5.3 STREET ADDRESS					
CITY-ST-ZIP	MARBLE FALLS TX 78654		5.4 CITY-		1				
TITLE		☐ DELETE	6.1 TITLE		1		☐ Change	Addition	
NAME			6.2 NAME		1				
STREET ADDRESS			6.3 STREE	T ADDRESS	1				
1					1				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Daniel Larry Sandel Res 4/25/98 850-837-3985