

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 02, 2004 8:00 am**  
**Secretary of State**

08-02-2004 90005 022 \*\*\*\*61.25

**DOCUMENT # N02000008485**

1. Entity Name  
**VILLAS OF SPYGLASS, INC.**



Principal Place of Business  
**104 SABBTRAO ROAD,  
 SUITE 108  
 MIRAMAR BEACH, FL 32550**

Mailing Address  
**104 SABBTRAO ROAD,  
 SUITE 108  
 MIRAMAR BEACH, FL 32550**

**54065979**



2. Principal Place of Business  
**104 Sandtrap Rd.  
 Suite, Apt. #, etc.  
 #108**

3. Mailing Address  
 Suite, Apt. #, etc.

07222004 Chg-NP CR2E037 (10/03)

City & State  
**Destin FL**

City & State

4. FEI Number  
**81-0574120**

Applied For  
 Not Applicable

Zip  
**32550**

Country  
**US**

Zip

Country

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

**6. Name and Address of Current Registered Agent**

**STANLEY H. HALL  
 104 SANDTRAP RD. #108  
 MIRAMAR BEACH, FL 32550**

**7. Name and Address of New Registered Agent**

Name **David B Pleat**  
 Street Address (P.O. Box Number is Not Acceptable)  
**104 Sandtrap Rd. #108**  
 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

*David B Pleat*

**7/25/04**

**Filing Fee is \$61.25  
 Due by September 8, 2004**

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	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>HALL, STANLEY H</b>	
STREET ADDRESS	<b>104 SANDTRAP ROAD SUITE 108</b>	
CITY-ST-ZIP	<b>DESTIN, FL 32550</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>SIMS, GARY</b>	
STREET ADDRESS	<b>108 BEACH DRIVE WEST</b>	
CITY-ST-ZIP	<b>DESTIN, FL 32541</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HYATT, RICHARD</b>	
STREET ADDRESS	<b>4360 STONEBRIDGE ROAD, UNIT 101</b>	
CITY-ST-ZIP	<b>DESTIN, FL 32550</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Eddie Torre</b>	
STREET ADDRESS	<b>43 Heron Point Ct</b>	
CITY-ST-ZIP	<b>Destin FL 32550</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 life empowered.

SIGNATURE:

*David B Pleat*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-22-04**

Date Daytime Phone #

Attachment 54065379

DAVID B. PLEAT\*  
AMY A. PERRY\*\* †



#10200008485

4477 LEGENDARY DRIVE  
SUITE 202  
DESTIN, FLORIDA 32541  
850.650.0599  
FAX 850.650.4402  
law@pleat.coxatwork.com

CHRISTOPHER H. McELROY  
WM. J. "WEST" RITCHIE

PLEAT & PERRY, P.A.  
• ATTORNEYS AT LAW •

\*Also Admitted In D.C. & MD.  
\*\*Also Admitted In GA.  
† Supreme Court Certified Mediator

July 26, 2004

Florida Department of State  
Division of Corporations  
New Filing Section  
409 E. Gaines Street  
Tallahassee, FL 32399

Re: 2004 UBR for Villas of Spyglass, Inc.

Dear Sir or Madam:

Enclosed is the original *2004 Not-For-Profit Corporation Annual Report* along with Check No. 1098 in the amount of \$61.25 to cover the filing fee for the 2004 UBR. Please forward a date stamped copy of the 2004 UBR upon your filing of same so that we can confirm that the company has not been dissolved and is current in their 2004 UBR filing. We have enclosed a self-addressed stamped envelope for your convenience.

Thank you for your prompt cooperation in this matter. Should you have any questions, please do not hesitate to contact me.

Sincerely,

David B. Pleat

DBP/kmb  
Enclosures

cc: Mr. Stanley H. Hall

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*[Faint, illegible text at the bottom of the page, possibly bleed-through or a second page.]*