2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90782 001 ****61.25
04-20-2005 90782 002 *****8.75

DOCUMENT # N02738

1. Entity Name

SANDPRINTS CONDOMINIUM ASSOCIATION, INC. OF DESTIN, FLORIDA

Principal Place of Business	Mailing Address
P.O. BOX 6656 MIRAMAR BEACH FL 32550	P.O. BOX 6656 MIRAMAR BEACH FL 32550

1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address
60 SANDPRINTS DRIVE	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DESTIN (MIRAMAR BCH), FL	City & State
Zip: 32550 Country: USA	Zip Country

4. FEI Number: 59-2462623 ☐ 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
MIDDLETON, JAMES W 216 NE HOSPITAK DR FORT WALTON BEACH FL 32548	Name: DAVID JOHNSTON Street Address (P.O. Box Number is Not Acceptable): 60 SANDPRINTS DRIVE, UNIT E-2 City: DESTIN (MIRAMAR BEACH), 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: X David Johnston — X 4/6/2005
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
Due By May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EVANS, JAMES F 839 COOPER AVENUE COLUMBUS GA 31906	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR TEASLEY, DEAN 1428 QUAIL RUN ROAD NASHVILLE, TN 37214	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HARVEY, ROBERT T PO BOX 41 N/A DESTIN FL 32540	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR WARNEKE, KIM 8245 PAMPLONA STREET NAVARRE, FL 32566	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR SEC/TREAS STEMBRIDGE, JOHN 692 HUNTINGTON WAY LILBURN GA 30047-2670	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR JOHNSTON, DAVID 60 SANDPRINTS DRIVE, UNIT E-2 DESTIN (MIRAMAR BCH), FL 32550	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR PRESIDENT HARRINGTON, WILLIAM W 3270 FLINT DR. COLUMBUS GA 31907-2030	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR HART, STEVE 45 WOODS FORD ROAD SHARPSBURG, GA 30277	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANTORO, JOE 3395 SPRING DR DORAVILLE GA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR THYME, JIM 9305 WHITNEY LANE COLLEGE STATION, TX 77840	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOCKT, DUNNE 6109 CAHRING DRIVE COLUMBUS GA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR RICK MANGRUM 534 CREEK POINT ROAD MOUNT JULIET, TN 37122	☐ Change ☒ 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: John D. Stembridge — JOHN D. STEMBRIDGE SEC/TREAS — 4/15/2005 — 678-924-0977
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #