9/14/01-90033-002-$70.00-$70.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N04884

1. Entity Name

INLET SANDS OWNERS ASSOCIATION, INC.

FILED
01 SEP 27 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
126 S WALTON LAKESHORE DR 2 PANAMA CITY FL 32413 US	PO BOX 615 COLUMBIANA AL 35051 US

2. Principal Place of Business	3. Mailing Address
	% M. D. BELL 5780 MILLER RD. EXT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: AUSTELL GA
Zip / Country	Zip: 30106 / Country: U.S.

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2746186 ☐ 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
O'BRIAN, DEBBIE RT. 6, BOX 429 PANAMA CITY FL 32407	Name: MICHAEL MONCRIEF Street Address (P.O. Box Number is Not Acceptable): 219 MOONLIGHT BAY DR. City: PANAMA CITY BEACH FL Zip Code: 32407

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 [signature] — MICHAEL MONCRIEF SEPT. 9, 2001
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
After September 12, 2001, min. will be $236.25

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: P NAME: ALEXANDER, WILSON STREET ADDRESS: 106 WEST STERRET STREET CITY-ST-ZIP: COLUMBIANA AL 35051	☑ Delete	TITLE: P NAME: MAXIMO A. BATISTA STREET ADDRESS: 3221 TURTLE LK CT CITY-ST-ZIP: MARIETTA, GA 30067-5018	☑ Change ☐ Addition
TITLE: S NAME: ELWELL, BRENDA STREET ADDRESS: 3660 SPRINGWELL CT CITY-ST-ZIP: DOUGLASVILLE GA	☑ Delete	TITLE: S NAME: JIM BELVIN STREET ADDRESS: 5304 CUMBERLAND WAY CITY-ST-ZIP: STONE MOUNTAIN, GA 30087	☑ Change ☐ Addition
TITLE: D NAME: GIBSON, THOMAS H. STREET ADDRESS: 1140 COMMERCE RD CITY-ST-ZIP: MARROW GA	☑ Delete	TITLE: T D NAME: M. DIANE BELL STREET ADDRESS: 5780 MILLER RD. EXT. CITY-ST-ZIP: AUSTELL, GA 30106	☑ Change ☐ Addition
TITLE: D NAME: RAFLAND, JOE STREET ADDRESS: 3869 PELZCA AVE CITY-ST-ZIP: MONTGOMERY AL 36109	☑ Delete	TITLE: V D NAME: DAWN McCULLAR STREET ADDRESS: 4950 CARBY STATION RD CITY-ST-ZIP: GREENSBORO, GA 30642	☑ Change ☐ Addition
TITLE: D NAME: DELONEY, ANGELA STREET ADDRESS: 806 WIMBLEDON DRIVE CITY-ST-ZIP: DOTHAN AL	☑ Delete	TITLE: D NAME: BILL DELONEY STREET ADDRESS: 210 FOXWORTH CT. CITY-ST-ZIP: DOTHAN, AL 36305	☑ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☑ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

CR2E037 (5/01)

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: [signature] MAXIMO A. BATISTA SEPT. 09, 2001 770.955.1875
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Corrected ... Sept 24 2001 ...