

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 11, 2006 8:00 am**  
**Secretary of State**

08-11-2006 90002 021 \*\*\*\*61.25

<b>DOCUMENT # N05000003498</b> 1. Entity Name <b>THE DUNES OF CRYSTAL BEACH OWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>% 1234 AIRPORT RD - STE 121 -</b> <b>DESTIN, FL 32541</b> <i>2780 SCENIC 98</i>		Mailing Address <i>1751 SCENIC 98</i> <b>% 1234 AIRPORT RD - STE 121</b> <b>DESTIN, FL 32541</b>	
2. Principal Place of Business <i>2780 SCENIC HWY 98</i>		3. Mailing Address <i>1751 SCENIC HWY 98</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>DESTIN, FL</b>		City & State <b>DESTIN, FL</b>	
Zip <b>32541</b>		Zip <b>32541</b>	
Country <b>OKALOOSA</b>		Country <b>OKALOOSA</b>	
6. Name and Address of Current Registered Agent  <b>MATTHEWS, DANA C</b> <i>STERLING RESORTS LLC</i> <b>4475 LEGENDARY DR</b> <i>1751 SCENIC HWY 98</i> <b>DESTIN, FL 32541</b> <i>DESTIN, FL 32541</i>		7. Name and Address of New Registered Agent Name <i>STERLING RESORTS, LLC</i> Street Address (P.O. Box Number is Not Acceptable) <i>1751 SCENIC HWY 98</i> City <i>DESTIN</i> <b>FL</b> Zip Code <i>32541</i>	
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 <i>Rita Raus</i> <b>ASSOCIATION MANAGER</b> <i>for Sterling Resorts, LLC</i> <b>RITA RAUS</b> <i>7/23/06</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
<b>Filing Fee is \$61.25</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>		<b>10. OFFICERS AND DIRECTORS</b>	
TITLE <b>DIR</b> NAME <b>RUSHING, O. FRANK JR</b> STREET ADDRESS <b>% 1234 AIRPORT RD - STE 121</b> CITY-ST-ZIP <b>DESTIN, FL 32541</b>	<input type="checkbox"/> Delete	<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>VPST DIR</b> NAME <b>RUSHING, JOHN R</b> STREET ADDRESS <b>% 1234 AIRPORT RD - STE 121</b> CITY-ST-ZIP <b>DESTIN, FL 32541</b>	<input type="checkbox"/> Delete	TITLE <b>PRES.</b> NAME <b>STEVE SUKSTORF</b> STREET ADDRESS <b>2780 SCENIC HWY 98 #105</b> CITY-ST-ZIP <b>DESTIN, FL 32541</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b> NAME <b>RUSHING, JOHN R</b> STREET ADDRESS <b>% 1234 AIRPORT RD - STE 121</b> CITY-ST-ZIP <b>DESTIN, FL 32541</b>	<input checked="" type="checkbox"/> Delete	TITLE <b>VP</b> NAME <b>BILL DAHLBERG (ALFRED)</b> STREET ADDRESS <b>1871 CHARTWELL TRACE</b> CITY-ST-ZIP <b>STONE MT., GA 30087</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b> NAME <b>CONNART, DAVID B</b> STREET ADDRESS <b>% 1234 AIRPORT RD - STE 121</b> CITY-ST-ZIP <b>DESTIN, FL 32541</b>	<input checked="" type="checkbox"/> Delete	TITLE <b>SEC TREAS.</b> NAME <b>JERRY PAVLAS</b> STREET ADDRESS <b>1204 Serenade Circle</b> CITY-ST-ZIP <b>Plano, TX 75075</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>DIR</b> NAME <b>TIMOTHY DODSON</b> STREET ADDRESS <b>2135 River Cliff Dr.</b> CITY-ST-ZIP <b>Roswell, GA 30076</b>	<input checked="" type="checkbox"/> Delete	TITLE <b>DIR</b> NAME <b>JOHN CHRISTOPHER</b> STREET ADDRESS <b>2710 LAUREL GARDEN DR.</b> CITY-ST-ZIP <b>KINGWOOD, TX 77339-2505</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>DIR</b> NAME <b>JOHN CHRISTOPHER</b> STREET ADDRESS <b>2710 LAUREL GARDEN DR.</b> CITY-ST-ZIP <b>KINGWOOD, TX 77339-2505</b>	<input type="checkbox"/> Delete	TITLE <b>DIR</b> NAME <b>JOHN CHRISTOPHER</b> STREET ADDRESS <b>2710 LAUREL GARDEN DR.</b> CITY-ST-ZIP <b>KINGWOOD, TX 77339-2505</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 another line empowered.			
<b>SIGNATURE:</b> <i>Steven J. Sukstorf</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>8/2/06</i> <small>Date</small>	
Daytime Phone #		Daytime Phone #	

*Steven J. Sukstorf, President*