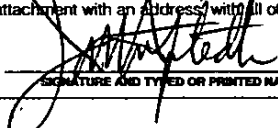


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90009 043 ****61.25

DOCUMENT # N10286 1. Entity Name CORAL REEF CLUB OWNERS' ASSOCIATION, INC.					
Principal Place of Business 2708 SCENIC HWY 98 EAST DESTIN, FL 32541 US			Mailing Address 2708 SCENIC HWY 98 EAST DESTIN, FL 32541 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 59-2686368				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONERLY, LAMAR JR 4481 LEGENDARY DR, #200 DESTIN, FL 32541			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
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 reinstating) DATE					
Filing 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 HUBBERT, MARCIA 2708 SCENIC HWY 98 EAST, #8 DESTIN, FL 32541	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKNIGHT, BILL 2708 SCENIC HWY, 98E DESTIN, FL 32541	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACK BERGSTROM 2708 SCENIC HWY 98E DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORNISH, FRANK 2708 SCENIC HWY, #98E DESTIN, FL 32541	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINCE, PHIL 2708 SCENIC HWY, 98E DESTIN, FL 32541	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HUFSTEDLER, JON 2708 SCENIC HWY 98 EAST DESTIN, FL 32541	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD WYNTRWAL, JOHN 2708 SCENIC HWY, 98 E DESTIN, FL 32541	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:  JON HUFSTEDLER				1-5-05 850-654-0350	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	