FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 21 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002241 (8)

1. Corporation Name

THE TIDES OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
112 EAST THIRD COURT PANAMA CITY FL	112 EAST THIRD COURT PANAMA CITY FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/13/1993
3a. Date of Last Report: 04/06/1994
4. FEI Number: ~~NOT APPLICABLE~~ 59-3231081 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 17495 Front Beach Rd.	26 17644 Front Beach Rd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Panama City Bch., FL	City & State 28 Panama City Bch., FL
Zip / Country 24 32413 / 25 US	Zip / Country 29 32413 / 30 US

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BENNETT, DERRICK
112 EAST THIRD COURT
PANAMA CITY FL

10. Name and Address of New Registered Agent

81 Name: Stephens, Larry W.
82 Street Address (P.O. Box Number is Not Acceptable): 17644 Front Beach Rd.
83
84 City: Panama City Beach, FL 85 Zip Code: 32413

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Larry W Stephens — DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	VD	☒ Change ☐ Addition
NAME	WOODHAM, WENDELL W	1.2 NAME		
STREET ADDRESS	ROUTE 2, BOX 75	1.3 STREET ADDRESS		
CITY-ST-ZIP	CRACEVILLE FL 32440	1.4 CITY-ST-ZIP	Graceville, FL 32440	
TITLE	VD	2.1 TITLE	PD	☒ Change ☐ Addition
NAME	WOODHAM, ROBERT K	2.2 NAME	McArthur, Edwin	
STREET ADDRESS	ROUTE 2, BOX 75	2.3 STREET ADDRESS	8617 Pebble Creek Ct.	
CITY-ST-ZIP	CRACEVILLE FL 32440	2.4 CITY-ST-ZIP	Montgomery, AL 36116	
TITLE	STD	3.1 TITLE	STD	☒ Change ☐ Addition
NAME	WOODHAM, PATSY J	3.2 NAME	Stephens, Teresa	
STREET ADDRESS	ROUTE 2, BOX 75	3.3 STREET ADDRESS	17644 Front Beach Rd.	
CITY-ST-ZIP	GRACEVILLE FL 32440	3.4 CITY-ST-ZIP	Panama City Bch., FL 32413	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Larry W Stephens — 3-22-95 — 904-234-7772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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