

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N93000003446 (2)**
1. Corporation Name

SANDESTIN CLUB DRIVE OWNERS ASSOCIATION, INC.



Principal Place of Business	Mailing Address
1096 OLD HWY 98 SUITE C-102B DESTIN FL 32541 US	1096 OLD HWY 98 SUITE C-102B DESTIN FL 32541 US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 1096 Old Hwy 98
22 City & State	27 Suite C-102B
23 Zip	28 Destin, FL
24 Country	29 32541
25	30 US

3. Date Incorporated or Qualified	07/28/1993
4. FEI Number	59-3203703
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. Is this nonprofit corporation a homeowners association?	☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☐ No

9. Name and Address of Current Registered Agent
PRATT, LINDA A 1096 OLD HWY 98 SUITE C-102B DESTIN FL 32541

10. Name and Address of New Registered Agent
81 Name Bell, David W
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *David W. Bell* **DAVID W. BELL** **3-16-98**
(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS	
TITLE	VPD ☒ DELETE
NAME	GELANDER, BRUCE
STREET ADDRESS	9300 HWY 98
CITY-ST-ZIP	DESTIN FL
TITLE	PD ☐ DELETE
NAME	HUTCHINSON, SUSAN
STREET ADDRESS	3005 BAY VILLAS
CITY-ST-ZIP	DESTIN FL
TITLE	D ☒ DELETE
NAME	NIEHAUS, CONNIE
STREET ADDRESS	3224 BAY ESTATES
CITY-ST-ZIP	DESTON FL
TITLE	STD ☒ DELETE
NAME	ASKEW, VANCE
STREET ADDRESS	9300 HWY 98
CITY-ST-ZIP	DESTIN FL
TITLE	D ☒ DELETE
NAME	HARTMANN, EDWARD
STREET ADDRESS	9300 HWY 98
CITY-ST-ZIP	DESTIN FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 3 AND DIRECTORS IN 12	
1.1 TITLE	VPD TAYLOR, KEANE ☐ Change ☒ Addition
1.2 NAME	3007 Bay Villa
1.3 STREET ADDRESS	Destin, FL 32541
1.4 CITY-ST-ZIP	
2.1 TITLE	PD BROWN, SHELBY ☐ Change ☒ Addition
2.2 NAME	3016 Bay Villas
2.3 STREET ADDRESS	Destin, FL 32541
2.4 CITY-ST-ZIP	
3.1 TITLE	D ASKEW, VANCE ☐ Change ☒ Addition
3.2 NAME	9300 Hwy 98
3.3 STREET ADDRESS	Destin FL 32541
3.4 CITY-ST-ZIP	
4.1 TITLE	STD GRILL, SUE ☐ Change ☒ Addition
4.2 NAME	3259 Burnt Pine Cove
4.3 STREET ADDRESS	Destin FL 32541
4.4 CITY-ST-ZIP	
5.1 TITLE	D Hutchinson, Susan ☒ Change ☐ Addition
5.2 NAME	3005 Bay Villas
5.3 STREET ADDRESS	Destin, FL 32541
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: *Vance Askew* **VANCE ASKEW** **3-3-98**

CR2E037 (1097)