2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003446

1. Entity Name

SIGNATURE:

BURNT PINE HOMEOWNERS ASSOCIATION, INC.



FILED Mar 03, 2003 8:00 am Secretary of State 03-03-2003 90447 002 ****61.25

Principal Place of Business 1096 SCENIC GULF DRIVE SUITE C-102B DESTIN FL 32550		Mailing Address 1096 SCENIC GULF DRIVE SUITE C-102B US 11N FL 32550			 					
	ace of Business Srand Blvd #, etc.	3. Mailing Address 215 Grand Blvd Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES						
City & State		City & State	FL		4. FEI Number 59	-3203703	<u> </u>	plied For		
Zip Zip	Country	Destin	Country		5. Certificate of Sta	tus Desired \Box	\$8.75 Add			
3255	6. Name and Address of Current F	32550	<u>u.5.</u>		7. Name and Addr		Fee Required red Agent	1		
	6. Name and Address of Current r	registered Agent	Name 1	Day						
· LEE, CAT	HYJ- NIC GULF-DRIVE 215 GRA	and BMD.			P.O. Box Number is N					
SUREC	1028		215	G	rand B	lvd.	-			
DESTIN F			City D	cest	10		FL 325	50		
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 SIGNATUR										
F	FILE NOW: FEE IS \$61.25	Trust Fund Co			\$5.00 May Be Added to Fees	Florida De	epartment of S	State		
10.	OFFICERS AND DIF		11.	_	ADDITIONS/CHANGE	S TO OFFICERS AN		i 10		
TITLE NAME STREET ADDRESS	DP Stowe, David 3201 Bay estates drive	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bai 44	Maher maher cenwich	Avenue CT 068	Change	Addition		
CITY-ST-ZIP TITLE	DESTIN FL 32550 DST	Delete	TITLE	P	,		☐ Change	Addition		
NAME STREET ADDRESS	RIEDEL, STEVE C 3271 BURNT PINE LANE	المنافع المناف	NAME STREET ADDRESS	3 0		Drive				
CITY-ST-ZIP	DESTIN FL 32550	Delete	CITY-ST-ZIP	De:	stin, Fl	32550	D Change	☐ Addition		
TITLE NAME STREET ADDRESS	ASKEW, VANCE 9300 HWY 98	Perete	NAME STREET ADDRESS					i		
CITY-ST-ZIP	DESTIN FL 32541		CITY-ST-ZIP	<u>.</u>				Addition		
TITLE NAME	DV GRILL, SUE	☐ Delete	TITLE NAME				☐ Change	[_] Addition		
STREET ADDRESS	3259 BURNT PINE COVE		STREET ADDRESS CITY-ST-ZIP		•					
CITY-ST-ZIP	DESTIN FL 32550	Delete	TITLE				☐ Change	Addition		
NAME	OLINGER, DOUGLAS J	5000	NAME							
STREET ADDRESS CITY-ST-ZIP	11801 SPINAL PASS CINCINNATI OH 45249		STREET ADDRESS CITY-ST-ZIP				-18:-			
TITLE	D . `	. Delete	TITLE				Change	☐ Addition		
NAME STREET ADDRESS	LAMARCHE, JUDITH 167 COVE AT SEVENTEEN		NAME STREET ADDRESS					ĺ		
CITY-ST-ZIP	DESTIN FL 32550	·	CITY-ST-ZIP							
t of the cor	certify that the information supplied with on this report or supplemental report is rporation or the receiver or trustee empore, or on an attachmen with an address,	owered to execute this report a	the exemption sta by signature shall h as required by Cha	ted in Sa nave the apter 61	ection 119.07(3)(i), Flo same legal effect as i 7, Florida Statutes; an	orida Statutes. I furth f made under oath; t d that my name app	er certify that the i that I am an officer ears in Block 10 o	ntormation or director r Block 11 if		