

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 769670

**Entity Name:** ST. THOMAS SQUARE MASTER OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8730 THOMAS DR.  
PANAMA CITY BEACH, FL 32408**Current Mailing Address:**8730 THOMAS DR.  
PANAMA CITY BEACH, FL 32408 US**FEI Number:** 59-2352746**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MYERS, ALLEN R  
8730 THOMAS DR.  
PANAMA CITY BEACH, FL 32408 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	VP
Name	LUTHER, W.B.
Address	8725 N. LAGOON DR
City-State-Zip:	PANAMA CITY BEACH FL 32408

Title	PRESIDENT
Name	MYERS, ALLEN
Address	150 EMERALD DR
City-State-Zip:	MCDONOUGH GA 30253

Title	DIRECTOR
Name	HOOVER, SEAN
Address	PO BOX 15680
City-State-Zip:	NEW ORLEANS LA 70175

Title	SECRETARY
Name	SCHMIDT, JAMES
Address	8730 THOMAS DR UNIT 410
City-State-Zip:	PANAMA CITY BEACH FL 32408

Title	TREASURER
Name	AMOS, STEPHANIE
Address	5769 PRINCESS BLVD.
City-State-Zip:	BIRMINGHAM AL 35215

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALLEN R MYERS

PRESIDENT

01/10/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date