

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007613

**Entity Name:** REFLECTIONS OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4100 MARRIOTT DRIVE  
PANAMA CITY BEACH, FL 32408**Current Mailing Address:**4100 MARRIOTT DRIVE  
PANAMA CITY BEACH, FL 32408 US**FEI Number:** 20-8924527**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARR, J. CHRISTOPHER ESQ.  
221 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 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:** J. CHRISTOPHER BARR, ESQ.

04/27/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** DIRECTOR**Name** HAMILTON, DUNCAN**Address** 2820 OVERTON ROAD**City-State-Zip:** BIRMINGHAM AL 35223**Title** DIRECTOR, PRESIDENT**Name** REYNOLDS , GEORGE**Address** 5928 ROARING BRANCH ROAD**City-State-Zip:** COLUMBUS GA 31904**Title** DIRECTOR, TREASURER**Name** PARKER, STEVEN**Address** 833 PEACHTREE DRIVE**City-State-Zip:** COLUMBUS GA 31906**Title** DIRECTOR, VP**Name** OWENS, JAMES**Address** 11 RIVER PINE DRIVE**City-State-Zip:** ROME GA 30165**Title** DIRECTOR, SECRETARY**Name** FRENCH, JAMES**Address** 15625 FRONT BEACH ROAD  
UNIT 1107**City-State-Zip:** PANAMA CITY BEACH FL 32413

*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:** GEORGE REYNOLDS

PRESIDENT

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date