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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N03340 (9)

1. Corporation Name

SANDY CREEK AIRPARK OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1-C AIRWAY
PANAMA CITY FL 32404
US

~~12901~~ 12901 Park way
PANAMA CITY FL 32404
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
05/30/1984	04/20/1994
4. FEI Number	Applied For Not Applicable
59-2637709	
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

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. 32404	29. USA

9. Name and Address of Current Registered Agent

EPLER, BRANSON
1-C AIRWAY
PANAMA CITY FL 32404

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. Zip Code
FL

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

Signature (typed or printed name of registered agent and date if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	HOLLIS, RENEE	1.2 NAME	KILIAN, JOHN
STREET ADDRESS	23601 SPRUCE CREEK BLVD	1.3 STREET ADDRESS	13304 AIA WAY
CITY - ST - ZIP	DANTONA OH FL	1.4 CITY - ST - ZIP	PANAMA CITY, FL 32404
TITLE	D	2.1 TITLE	D
NAME	DELANE, GREG	2.2 NAME	KARIBIAN, LOUISE
STREET ADDRESS	1-C AIRWAY	2.3 STREET ADDRESS	12940 PARK WAY
CITY - ST - ZIP	PANAMA CITY FL	2.4 CITY - ST - ZIP	PANAMA CITY, FL 32404
TITLE	ST	3.1 TITLE	
NAME	TURNER, RICHARD D	3.2 NAME	200001520122
STREET ADDRESS	13311 AIRWAY	3.3 STREET ADDRESS	-06/22/95--01013--009
CITY - ST - ZIP	PANAMA CITY FL	3.4 CITY - ST - ZIP	****155.00 ****155.00
TITLE	PD	4.1 TITLE	D
NAME	EPLER, BRANSON E.	4.2 NAME	
STREET ADDRESS	4652 BROOK FOREST DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	
NAME	WALSH, EDWARD A.	5.2 NAME	
STREET ADDRESS	42 AIRWAY	5.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	(President) PD
NAME	O'CONNOR, ED	6.2 NAME	555
STREET ADDRESS	13110 PARK WAY	6.3 STREET ADDRESS	6/20/95
CITY - ST - ZIP	PANAMA CITY FL	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 110.07(3)(k), 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: Richard D Turner RICHARD D. TURNER

June 1, 1995

904-283-2135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number