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Jan 23 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 737320 (2)

1. Corporation Name

PANAMA CITY-BAY COUNTY HOME BUILDERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2428 LISEBY AVENUE  
P.O. BOX 979  
PANAMA CITY FL 32402

2428 LISEBY AVENUE  
P.O. BOX 979  
PANAMA CITY FL 32402-0979



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified  
11/16/1976

3a. Date of Last Report  
01/24/1996

4. FEI Number  
59-1584523

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JERRY FULCHER, EXECUTIVE OFFICER  
2428 LISEBY AVENUE  
PANAMA CITY BCH FL 32405

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME LEDMAN, BILL  
STREET ADDRESS VAY POINT, BOX 27267  
CITY-ST-ZIP PANAMA CITY FL

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME HADDOCK, BILL  
STREET ADDRESS 2305 HIGHWAY 77  
CITY-ST-ZIP PANAMA CITY FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE VP ☐ DELETE  
NAME CRAWFORD, JOHN  
STREET ADDRESS 109 LAKE PLACE  
CITY-ST-ZIP PANAMA CITY BEACH FL

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME GLADSTONE, TOM  
STREET ADDRESS 2810 GORDON ST  
CITY-ST-ZIP PANAMA CITY FL

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME COOLEY, RICHARD  
STREET ADDRESS 1819 DRUMMOND AVE  
CITY-ST-ZIP PANAMA CITY FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME Guthrie, Allen  
STREET ADDRESS 129 Bayou Dr.  
CITY-ST-ZIP Panama City, FL 32401

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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: John Crawford

7 JAN 97

(904) 234-2072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #0000469

CR2E037 (9/96)