

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90050 048 ****61.25

DOCUMENT # 737320

1. Entity Name

**PANAMA CITY-BAY COUNTY HOME BUILDERS ASSOCIATION
, INC.**

Principal Place of Business

**2428 LIENBY AVENUE
P.O. BOX 979
PANAMA CITY FL 32402**

Mailing Address

**2428 LIENBY AVENUE
P.O. BOX 979
PANAMA CITY FL 32402**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1584523**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

8 JAN 02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V LEDMAN, BILL
VAY POINT, BOX 27267
PANAMA CITY FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D CRAWFORD, JOHN
109 LAKE PLACE
PANAMA CITY BEACH FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D HARTZOG, CULLEN
111 FLORIDA AVE
LYNN HAVEN FL 32444** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P GUTHRIE, ALLEN
129 BAYOU DRIVE
PANAMA CITY FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☒ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Allen Guthrie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 JAN 02
Date

785-2019
Daytime Phone #

CR2E037 (9/01)