

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 18, 2002 8:00 am**  
**Secretary of State**  
 03-18-2002 90188 039 \*\*\*150.00

**DOCUMENT # G46342**

1. Entity Name  
**PBG FINANCIAL SERVICES, INC.**

Principal Place of Business

% DONALD R GRAHAM  
 P.O. BOX 596  
 GRACEVILLE FL 32440

Mailing Address

% DONALD R GRAHAM  
 P.O. BOX 596  
 GRACEVILLE FL 32440

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  
**59-2382703**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAHAM, DONALD R  
 5306 BROWN ST  
 GRACEVILLE FL 32440

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D WAYMER, BRYAN W**  
**1188 10TH AVE.**  
**GRACEVILLE FL 32440**

☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D PELHAM, CLIFFORD**  
**1239 HWY 2**  
**GRACEVILLE FL 32440**

☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D STEPHENSON, CHARLES**  
**1717 HWY 2**  
**CAMPBELLTON FL**

☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DVC MCRAE, FINLEY**  
**1605 8TH AVE.**  
**GRACEVILLE FL**

☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D HAMM, JOHN W.**  
**RT 3 BOX 208**  
**SLOCUMB AL**

☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-02 850-263-3267  
 Date Daytime Phone #

CR2E034 (9/01)

Attachment  
Document # G46342  
608712

**PBG FINANCIAL SERVICES, #G46342**

**CONT:**

Joseph A. Sheffield, Director  
1431 Trout Drive  
Panama City, FL 32411

Donald R. Graham, Director, Chrm.  
1104 Ezell St.  
Graceville, FL 32440

Joseph H. Jernigan, Director  
1506 E. 10<sup>th</sup> Ave.  
Graceville, FL 32440

John B. Turner, Director  
125 Wentworth Dr.  
Dothan, AL 36301

David M. Watford, Director  
5359 Ceiley St.  
Graceville, FL 32440

Carol C. Smith, Treas.  
1255 Sanders Ave.  
Graceville, FL 32440

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