

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 09, 2002 8:00 am
Secretary of State

05-09-2002 90038 015 *****61.25

DOCUMENT # N10021

1. Entity Name

PIRATES COVE INLET MASTER HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

300 CAIN RD.
PANAMA CITY BCH. FL 32413
US

300 CAIN RD.
PANAMA CITY BEACH FL 32413

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2884891

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GAYLOR, BARBARA J
300 CAIN RD
PANAMA CITY BCH. FL 32413

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

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 VPD
NAME WINDHAM, BUDDY
STREET ADDRESS 147 CAIN RD.
CITY-ST-ZIP PANAMA CITY BCH. FL 32413 ☐ Delete

TITLE D
NAME THOMPSON, MARK
STREET ADDRESS 150 CAIN RD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413 ☒ Delete

TITLE S
NAME COLEMAN, RON
STREET ADDRESS 309 CAIN RD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413 ☐ Delete

TITLE P
NAME PEASE, FRANK
STREET ADDRESS 144 CAIN RD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413 ☐ Delete

TITLE T
NAME GAYLOR, BARBARA J
STREET ADDRESS 206 CAIN RD
CITY-ST-ZIP PANAMA CITY BCH FL 32413 ☐ Delete

TITLE V
NAME WINDHAM, BUDDY
STREET ADDRESS 147 CAIN RD
CITY-ST-ZIP PANAMA CITY BEACH FL 32413 ☒ Delete

TITLE D
NAME WINDHAM, BUDDY
STREET ADDRESS 147 CAIN RD.
CITY-ST-ZIP PANAMA CITY BCH. FL 32413 ☒ Change ☐ Addition

TITLE P/D
NAME SWANK, DAVE
STREET ADDRESS 118 IRONWOOD RD
CITY-ST-ZIP ENTERPRISE, AL 36330 ☒ Change ☒ Addition

TITLE V/D
NAME COLEMAN, RON
STREET ADDRESS 309 CAIN RD
CITY-ST-ZIP PANAMA CITY BCH, FL 32413 ☒ Change ☐ Addition

TITLE D
NAME PEASE, FRANK
STREET ADDRESS 144 CAIN RD.
CITY-ST-ZIP PANAMA CITY BCH, FL 32413 ☒ Change ☐ Addition

TITLE TSD
NAME GAYLOR, BARBARA
STREET ADDRESS 206 CAIN RD
CITY-ST-ZIP PANAMA CITY BCH, FL 32413 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Barbara J. Gaylor

Barbara J. GAYLOR 4-22-02

1-850-302-3662

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)