2001 UNIFORM BUSINESS REPORT (UBR)

May 23, 2001 8:00 am Secretary of State **DOCUMENT # N10523** 1. Entity Name 04-27-2001 90354 011 ****61.25 HOLIDAY BEACH ON THE GULF PROPERTY OWNERS ASSOCI Principal Place of Business Mailing Address JACK D. PEAVY JACK D. PEAVY 4129 DANNY DR. 4129 DANNY DR. PANAMA CITY BCH, FL 32408 PANAMA CITY BCH. FL 32403 2. Principal Place of Business 3. Mailing Address 4123 Nances Drive 4123 Nances Druce Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 5 9. 315 18 19 WOT-APPLICABLE Applied For City & State City & State ## Parine C.T. Brown FC PARINE C.B. Kens Not Applicable Country Zip Country Zip 3×40分 \$8.75 Additional 5. Certificate of Status Desired 32408 C15 A WA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WILKES, KEN 7031 THOMAS DR PANAMA CITY BEACH FL 32408 Zip Code スインC 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. 4-18-01 yped or printed name of rouistered agent and title if applicable (NOTE: filedistered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribut on. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE PD ☐ Change Addition TITI F 1806 Adams KEN WILKES NAME NAME 4123 MARCOR PRIVE STREET ADDRESS 7031 THOMAS DR. STREET ADDRESS Parama City Beach FL 3292 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL Change Addition Delete TITLE TITLE Bond Burgar THOMAS NANCE NAME NAME 8047 Conty Line Rd RoberTSUNE MO 63072 STREET ADDRESS STREET ADDRESS 4108 NANCEE DR. PANAMA CITY BCH FL CITY-ST-ZIP CITY-ST-ZIP AD Addition TITLE Delete TITLE ☐ Change Maney Mancer Princ. HIGHSMITH, MIKE NAME NAME STREET ADDRESS 4120 DANNY DR. STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL CITY-SI-ZIP Parenne City Boach J Delete TITLE THLE ☐ Chance Addition Terry Adams ADAMS, ROBERT NAME NAME 4123 Nances Drive STREET ADDRESS 4123 NANCEE DR STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32408 CITY-ST-ZIP Parama City Beach FL 32498 PRA TITLE Delete TITLE Change ☐ Addition PEAVY, JACK NAME NAME STREET ADDRESS 4129 DANNY DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL ☐ Change TITLE √ Delete TITLE ☐ Addition **BRENDA ELLIS** NAME NAME STREET ADDRESS STREET ADDRESS 4133 DANNY DR. CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BCH FL

4/27/

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(S)(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 cath; 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

4-18-01 Date

*550-2*59-555⁻⁶7

Caylime Phone #