2002 UNIFORM BUSINESS REPORT (UBR)

Feb 26, 2002 8:00 am L **DOCUMENT # N16092 Secretary of State** 1. Entity Name GULF BEACH PRESBYTERIAN CHURCH OF PANAMA CITY BE 02-26-2002 90131 008 ****61.25 Principal Place of Business Mailing Address GULF XXXX BEACH PRESBYTERIAN CHURCH **GULF BEACH PRESBYTERIAN CHURCH** 271 S. HIGHWAY 79 271 S HIGHWAY 79 B0031993 PANAMA CITY FL 32413 PANAMA CITY FL 32413 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2383759 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) HOPKINS, ARTHUR S 121 ROSE CORAL DR PANAMA CITY FL 32408 City 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. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE □ Delete TITLE Change Addition CR2E037 (9/01 HOPKINS, ARTHUR S NAME NAME Charles Grier STREET ADDRESS 121 ROSE CORAL DR STREET ADDRESS P.O.Box 7438, 17680 FBR CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32408 Panama City Beach, FL ☐ Change ☐ Addition TITLE ☐ Delete TITI F BARNHART, CHRIS NAME NAME 321 FAIRWAY BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32407 TITLE ☐ Addition TITLE ☐ Change Delete NAME Leidgen. Vangie NAME STREET ADDRESS 17620 FRONT BEACH ROAD Q-6 STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32413 CITY-ST-ZIP TITLE ☐ Addition TITLE **XX**Delete ☐ Change CLARK, DOUGLAS A NAME NAME STREET ADDRESS PO BOX 27506 229 MARLIN CR STREET ADDRESS CITY-ST-7IP PANAMA CITY BCH FL 32411 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition HARRISON, WINDOLL NAME NAME STREET ADDRESS 22409 PALMCREST DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32413 TITLE ☐ Delete ☐ Addition GRIFFITTS, PHILIP SR NAME NAME 357 EAGLE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32407

FILED

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other

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