

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N21370 (4)

1. Corporation Name

PANAMA CITY BEACHES CHAMBER OF COMMERCE, INCORPORATED

Principal Place of Business

Mailing Address

415 BECKRICH RD., #200
PANAMA CITY BEACH FL 32407
US

P.O. BOX 9348
PANAMA CITY BEACH FL 32417
US



3. Date Incorporated or Qualified

06/29/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2857564

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARISH, DEBI A
415 BECKRICH RD., #200
PANAMA CITY BEACH FL 32407

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Debi Parish

(Signature types for both current registered agent and the applicant)

(If Not Registered Agent Signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	HILTON, JULIE	
STREET ADDRESS	11127 FRONT BEACH ROAD	
CITY-STATE-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	D	☒ DELETE
NAME	SOSTHEIM, PETER	
STREET ADDRESS	737 JENKS AVENUE	
CITY-STATE-ZIP	PANAMA CITY FL 32402	
TITLE	VPD	☐ DELETE
NAME	PILCHER, JACKIE	
STREET ADDRESS	6310 EAST HWY. 22	
CITY-STATE-ZIP	PANAMA CITY FL 32404	
TITLE	PD	☐ DELETE
NAME	SHAHER, DON	
STREET ADDRESS	13911 BACK BEACH ROAD	
CITY-STATE-ZIP	PANAMA CITY BEACH FL 32413	
TITLE	TD	☐ DELETE
NAME	SCHNITKER, MARK	
STREET ADDRESS	110 SOUTH ARNOLD RD	
CITY-STATE-ZIP	PANAMA CITY FL	
TITLE	D	☒ DELETE
NAME	SPARKS, TOM	
STREET ADDRESS	11212 FRONT BEACH ROAD	
CITY-STATE-ZIP	PANAMA CITY BEACH FL	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Past President	☒ Change ☐ Addition
12 NAME	Hilton, Julie	
13 STREET ADDRESS	11127 Front Beach Rd	
14 CITY-STATE-ZIP	Panama City Beach, FL 32407	
21 TITLE	VPD	☐ Change ☒ Addition
22 NAME	Babiston, Pat	
23 STREET ADDRESS	4412 Fletcher Street	
24 CITY-STATE-ZIP	Panama City, FL 32406	
31 TITLE	President	☒ Change ☐ Addition
32 NAME	Pilcher, Jackie	
33 STREET ADDRESS	6310 East Hwy 22	
34 CITY-STATE-ZIP	Panama City, FL 32404	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
61 TITLE	President elect	☐ Change ☒ Addition
62 NAME	John Craig	
63 STREET ADDRESS	Gulf Coast Community College	
64 CITY-STATE-ZIP	Panama City, FL 32405	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Debi Parish, Ex Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96

904-233-6577

Date

Daytime Phone #

CR2E037 (12/95)