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Feb 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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, INCORPO RATED

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE HUNT, DEBRA PEOPLES FIRST BANK PANAMA CITY BCH FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☒ Addition DEBORAH HUNT - PRESIDENT D P.O BOX 2950 N/A PANAMA CITY BEACH, FL 32402
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SABISTON, PAT 4412 FLETCHER STREET PANAMA CITY FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☒ Addition JOHN DUNAWAY, P.C. P.O. BOX 18225 N/A PCBCH, FL 32417 D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP PILCHER, JACKIE 6310 EAST HWY. 22 PANAMA CITY FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☒ Addition JACKIE PILCHER, SEC P.O. BOX 2201 N/A PC, FL 32402 D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GILMORE, DOUG DRIFTWOOD LODGE PANAMA CITY BEACH FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☒ Addition JOHN GREESING, TREASURER 11001 FRONT BEACH ROAD PCBCH, FL 32407
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCHNITKER, MARK 110 SOUTH ARNOLD RD PANAMA CITY FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☒ Addition PAT SABISTON VP-SERVICE 4412 FLETCHER PLACE PC, FL 32405
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CRAIG, JOHN GULF COAST COMMUNITY COLLEGE PANAMA CITY FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☒ Addition MARIE FLEMING, VP-RETAIL P.O. BOX 9069 N/A PC, FL 32417

CR2E037 (10/97)

14. 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 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 1-16-98 850-233-6577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #