## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 19, 2001 8:00 am <sup>3</sup> Secretary of State DOCUMENT # N21370 1. Entity Name PANAMA CITY BEACHES CHAMBER OF COMMERCE, INCORPO 04-19-2001 90041 001 \*\*\*\*61.25 Principal Place of Business Mailing Address 415 BECKRICH RD., #200 P.O. BOX 9348 PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32417 at the original to the US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2857564 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PARISH, DEBI A 415 BECKRICH RD., #200 PANAMA CITY BEACH FL 32407 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DPE CR2E037 (10/00) Change Addition TITLE Delete TITLE . . D/C BISHOP, JACK NAME NAME Jack Bishop 12677 FRONT BEACH RD STREET ADDRESS STREET ADDRESS 12677 Front Bch. Rd. PANAMA CITY BEACH FL 32407 CITY-ST-ZIP CITY-ST-ZIP <del>Panama City-Beh., F</del>L Change TITLE TITLE XX Delete D DUNAWAY, JOHN NAME NAME John Gheesling P O BOX 18225 STREET ADDRESS STREET ADDRESS 11001 Front Bch. Rd. PANAMA CITY BEACH FL 32417 CITY-ST-7IP CITY-ST-ZIP 32407 Panama City Bch., - Change - XIX Addition XIX Delete TITLE D/S TITI F HINDSMAN, LYN Pat Horne NAME NAME 602 COLORADO AVE STREET ADDRESS STREET ADDRESS 9450 S. Thomas Dr. CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32444 Panama City Bch., FL 32408 DΡ ■ Addition XX Delete TITLE D/V Jimmy Patronis, Jr. ★ Nange TITLE **GUEESLING, JOHN** NAME NAME 11001 FRONT BEACH RD 5551 N. Lagoon Dr. STREET ADDRESS STREET ADDRESS CITY-ST-7IP PANAMA CITY BEACH FL 32407 Panama City Bch., FL CITY-ST-ZIP 32408 D/T XIX Delete Change XX Addition TITLE TITLE SABISTON, PAT NAME NAME Deborah Hunt 4412 FLETCHER PL STREET ADDRESS STREET ADORESS 1022 W. 23rd St. CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 Panama City, FL 32405 Dī TITLE X X Delete TITLE Change ☐ Addition PATEMIS JR, JIMMY NAME NAME 5551 N LAGOON DR STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

**SIGNATURE:** 

PANAMA CITY FL 32408

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-01

850-233-6577

Daytime Phone #