2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000042711

1. Entity Name

SALLYS PELICAN POINT, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State
01-27-2000 90080 001 ***150.00

Principal Place of Business
10310 MIDDLE BEACH ROAD
~~7121 FRONT BEACH RD~~ 7103 W Hwy 98
PANAMA CITY BEACH FL 32407
US

Mailing Address 7103 W Hwy 98
~~10310 MIDDLE BEACH ROAD~~
PANAMA CITY BEACH FL 32407-4865

UUU1UUJU

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7103 W. Hwy 98	7103 W. Hwy 98
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Panama City Beach, Fl	City & State: Panama City Beach, Fl
Zip 32407 Country Bay	Zip 32407 Country Bay

4. FEI Number 59-3113219 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TILLEY, SALLY A
~~10310 MIDDLE BEACH RD~~ 7103 W HWY 98
PANAMA CITY FL 32407

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☑ (See criteria on back)

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TILLEY, WILEY T		NAME	
STREET ADDRESS	138 PALM GROVE BOULEVARD		STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407		CITY-ST-ZIP	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TILLEY, SALLY		NAME	
STREET ADDRESS	138 PALM GROVE BOULEVARD		STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

CR2E034 (9/99)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sally Tilley 1-19-2000 850 2350552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #