

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000009618

FILED  
Sep 11, 2002  
Secretary of State

Entity Name: AMERICAN REALTY OF BAY COUNTY, INC.

**Current Principal Place of Business:**

7510 E THOMAS DRIVE  
STE E  
PANAMA CITY BEACH, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

7510 E THOMAS DRIVE  
STE E  
PANAMA CITY BEACH, FL 32408 US

**New Mailing Address:**

FEI Number: 59-3366338      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VIEJO, TONY VEGAS  
117 SEACCLUSION DR  
PANAMA CITY BEACH, FL 32413 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: VIEJO, TONY VEGAS  
Address: 117 SEACCLUSION DR  
City-St-Zip: PANAMA CITY, FL 32413

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY VEGAS VIEJO

PST

09/11/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date