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May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N24552** (4)

1. Corporation Name

BEACHWALK OWNERS ASSOCIATION, INC.

Principal Place of Business

**17751 PANAMA CITY BCH PKWY
PANAMA CITY BCH. FL 32413
US**

Mailing Address

**17751 PANAMA CITY BCH PKWY
PANAMA CITY BCH. FL 32413
US**

3. Date Incorporated or Qualified

01/28/1988

4. FEI Number

59-2877328

NOT APPLICABLE

Applied For

Not Applicable

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

**LANGLEY, BARBARA
17751 P C BCH PKWY, #14B
PANAMA CITY BCH. FL 32413**

10. Name and Address of New Registered Agent

81 Name

SAME

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME **DELL B. GATLIN**
STREET ADDRESS **17751 PC BEACH PKWY #1B**
CITY-ST-ZIP **PANAMA CITY BCH FL**

TITLE ☐ DELETE
NAME **BETTY KEEFE**
STREET ADDRESS **17751 PC BEACH PKWY #12B**
CITY-ST-ZIP **PANAMA CITY FL**

TITLE ☐ DELETE
NAME **LANGLEY, BARBARA**
STREET ADDRESS **17751 PC BCH PKWY #14B**
CITY-ST-ZIP **PANAMA CITY BEACH FL**

TITLE ☐ DELETE
NAME **JOHNSON, EDESL**
STREET ADDRESS **17751 PC BCH PKWY #17E**
CITY-ST-ZIP **PANAMA CITY FL**

TITLE ☐ DELETE
NAME **JIM MCNEILL**
STREET ADDRESS **17751 PC BCH PKWY #10E**
CITY-ST-ZIP **PANAMA CITY BCH FL**

TITLE ☐ DELETE
NAME **THOMAS, BOB**
STREET ADDRESS **17751 PC BCH PKWY**
CITY-ST-ZIP **PANAMA CITY BCH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **Deyrie Poppler**
1.3 STREET ADDRESS **6305 Reserve Liners Rd.**
1.4 CITY-ST-ZIP **Fort Wayne, IN 46819**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME **VP**
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME **#11A**
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Barbara Langley (BARBARA LANGLEY) 4/29/98 850-233-7142

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0000745

CR2E037 (10/97)