

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728520

**Entity Name:** GIRLS INCORPORATED OF BAY COUNTY

**Current Principal Place of Business:**

1100 FOUNTAIN AVENUE  
PANAMA CITY, FL 32401

**Current Mailing Address:**

PO BOX 1057  
PANAMA CITY, FL 32402 US

**FEI Number: 23-7393003**

**Certificate of Status Desired: Yes**

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

BRAGDON, DENISE F  
300 CLARA AVENUE  
PANAMA CITY BEACH, FL 32407 US

*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

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name TORCH, STACEY  
Address 300 CLARA AVENUE  
City-State-Zip: PANAMA CITY FL 32407

Title PAST PRESIDENT  
Name SHEAN, BEVERLY  
Address 2420 JENKS AVENUE  
#B4  
City-State-Zip: PANAMA CITY FL 32405

Title PRESIDENT  
Name DRACOS, MICHELLE  
Address 117 RIDGECREST CIRCLE  
City-State-Zip: PANAMA CITY FL 32405

Title VP  
Name WILDER, TARA  
Address 11212 FRONT BEACH ROAD  
City-State-Zip: PANAMA CITY BEACH FL 32407

Title TREASURER  
Name PARKER, ELIZABETH  
Address 627 E. 3RD STREET  
City-State-Zip: PANAMA CITY FL 32401

Title SECRETARY  
Name JONES, LINDSEY  
Address 230 W. 5TH STREET  
City-State-Zip: PANAMA CITY FL 32405

Title COMPLIANCE OFFICER  
Name LUMM, FRANKIE  
Address 316 FOXTAIL WAY  
City-State-Zip: PANAMA CITY BEACH FL 32407

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STACEY TORCH**

**EXECUTIVE DIRECTOR**

**01/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date