

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763425

**Entity Name:** AMBASSADOR BEACH OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15617 FRONT BCH RD  
PANAMA CITY BEACH, FL 32413

**Current Mailing Address:**

15617 FRONT BCH RD  
PANAMA CITY BEACH, FL 32413

**FEI Number:** 59-2251052

**Certificate of Status Desired:** No

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

HOWELL, SEABORN  
309 WAUKESHA STREET  
BONIFAY, FL 32425 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 PD  
Name HOWELL, SEABORN  
Address 309 WAUKESHA STREET  
City-State-Zip: BONIFAY FL 32425

Title VD  
Name GUNN, BETTY  
Address 6922 SOUTH LAGOON DR  
City-State-Zip: PANAMA CITY BEACH FL 32408

Title SD  
Name REMBER, PAT  
Address P.O. BOX 1358  
City-State-Zip: PINSON AL 35126

Title TD  
Name DYKES, HAROLD EJR  
Address 2210 W. 23RD ST  
City-State-Zip: PANAMA CITY FL 32405

*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:** SEABORN HOWELL

**PRES**

**05/03/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date