

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04752

**FILED**  
**Jan 09, 2017**  
**Secretary of State**  
**CC1090955176**

**Entity Name:** DUNES OF PANAMA FACILITIES CORPORATION

**Current Principal Place of Business:**

7205 THOMAS DR.  
BUILDING C  
PANAMA CITY BEACH, FL 32408

**Current Mailing Address:**

7205 THOMAS DR.  
BUILDING C  
PANAMA CITY BEACH, FL 32408 US

**FEI Number:** 59-2483915

**Certificate of Status Desired:** Yes

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

WILLIAMS, JACK  
502 HARMON AVENUE  
PANAMA CITY , FL 32402 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:** JACK WILLIAMS

01/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FURLOUGH, ROBERT DR.  
Address        228 ROSEHILL DR. NORTH  
City-State-Zip: TALLAHASSEE FL 32312

Title            SECRETARY  
Name            HORTON, JOHN  
Address        7205 THOMAS DRIVE, C303  
City-State-Zip: PANAMA CITY BEACH FL 32408

Title            VP  
Name            CALTON, JIMMY  
Address        226 E BROAD ST.  
City-State-Zip: EUFAULA AL 36027

Title            D  
Name            BOWERS, JOE  
Address        1536 MILLINGTON RD  
City-State-Zip: COLUMBUS GA 31904

Title            D  
Name            BANACH, WARREN DR  
Address        112 ABBEY LANE  
City-State-Zip: ENTERPRISE AL 36330

Title            DIRECTOR  
Name            WILLIS, LINDA  
Address        PO BOX 57  
City-State-Zip: MORRIS AL 35116

Title            DIRECTOR  
Name            STAFFORD, RALPH  
Address        469 CASTLE RD  
City-State-Zip: DALTON GA 30720

Title            DIRECTOR  
Name            FESMIRE, MARION  
Address        7205 THOMAS DR  
                  C601  
City-State-Zip: PANAMA CITY FL 32408

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*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:** ROBERT FURLOUGH

PRESIDENT

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            JONES, DON  
Address        6404 SPRINGWATER DRIVE  
City-State-Zip: COLUMBUS FL 31904