2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05835

Entity Name: POINT LAGOON COMMUNITY ASSOCIATION, INC.

FILED
Jan 07, 2020
Secretary of State
5906391357CC

Current Principal Place of Business:

8501 N. LAGOON DR.

PANAMA CITY BCH., FL 32408

Current Mailing Address:

8501 N LAGOON

#100

PANAMA CITY BCH., FL 32408 US

FEI Number: 59-3026296 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVENS, JESSICA 8501 N LAGOON DR #100

PANAMA CITY BEACH, FL 32408 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: JESSICA STEVENS 01/07/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

NameHANCOCK, BOBBYNameVALENTIN , ORLANDOAddress207 MILLENIA STAddress8501 N. LAGOON DR. #108City-State-Zip:ENTERPRISE AL 36330City-State-Zip:PANAMA CITY BCH. FL 32408

Title VP Title DIRECTOR

Name GILLIAM, DONNA Name CHOATE, SARAH

Address 8501 N. LAGOON DR. #509 Address 3104 GARDEN LAKE BLVD

City-State-Zip: PANAMA CITY BCH. FL 32408 City-State-Zip: ROME GA 30165

Title DIRECTOR Title SECRETARY

Name MCPHERSON, JAMES TERRY Name MCDANIEL, ANN

Address 8501 N LAGOON DR #107 Address 8501 NORTH LAGOON DRIVE

#401

City-State-Zip: PANAMA CITY BCH FL 32408 City-State-Zip: PANAMA CITY BEACH FL 32408

 Title
 TREASURER
 Title
 DIRECTOR

 Name
 SAWYER, DAN
 Name
 BURTON , AMY

Address 8501 N LAGOON DRIVE 4512 Address 8501 N LAGOON DRIVE #512

City-State-Zip: PANAMA CITY BEACH FL 32408 City-State-Zip:

City-State-Zip: PANAMA CITY BEACH 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: BOBBY HANCOCK PRESIDENT 01/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name JONES , BOBBY

Address 8501 N LAGOON DR

UNIT 101

City-State-Zip: PANAMA CITY BEACH FL 32408