

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 125303**

1. Entity Name

PANAMA CITY COCA COLA BOTTLING COMPANY**FILED****Jan 28, 2000 8:00 am**
Secretary of State

01-28-2000 90097 013 ***150.00

Principal Place of Business

Mailing Address

1900 REXFORD ROAD
P.O. BOX 31487
CHARLOTTE NC 282111900 REXFORD ROAD
P.O. BOX 31487
CHARLOTTE NC 28211-3387

2. Principal Place of Business

4100 Coca-Cola Plaza

3. Mailing Address

4100 Coca-Cola Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Charlotte, NC

City & State

Charlotte, NC

Zip

28211

Country

USA

Zip

28211

Country

USA

4. FEI Number

59-0391380

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	PD	<input type="checkbox"/> Delete
NAME	MOORE, JAMES L.	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	
TITLE	CD	<input type="checkbox"/> Delete
NAME	HARRISON III, J. FRANK	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HENRY, JOHN F. JR.	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	
TITLE	VPCF	<input type="checkbox"/> Delete
NAME	SINGER, DAVID V.	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	
TITLE	V	<input type="checkbox"/> Delete
NAME	KASBEKAR, UMESH M	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MELTON, T. FRED	
STREET ADDRESS	1900 REXFORD ROAD	
CITY-ST-ZIP	CHARLOTTE NC 28211	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Moore, James L.	
STREET ADDRESS	4100 Coca-Cola Plaza	
CITY-ST-ZIP	Charlotte, NC 28211	
TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harrison III, J. Frank	
STREET ADDRESS	4100 Coca-Cola Plaza	
CITY-ST-ZIP	Charlotte, NC 28211	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VCFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Singer, David V.	
STREET ADDRESS	4100 Coca-Cola Plaza	
CITY-ST-ZIP	Charlotte, NC 28211	
TITLE	VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kasbekar, Umesh M.	
STREET ADDRESS	4100 Coca-Cola Plaza	
CITY-ST-ZIP	Charlotte, NC 28211	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Melton, T. Fred	
STREET ADDRESS	4100 Coca-Cola Plaza	
CITY-ST-ZIP	Charlotte, NC 28211	

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *T. Fred Melton* REQUIRED Melton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(704) 551-4400

Date

Daytime Phone #

CR2E034 (9/99)