

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90029 016 ****70.00

DOCUMENT # 708916

1. Entity Name

BOYS & GIRLS CLUBS OF BAY COUNTY, INC.

Principal Place of Business

Mailing Address

**3404 WEST 19TH STREET
PANAMA CITY FL 32405-1500**

**3404 WEST 19TH STREET
PANAMA CITY FL 32405-1500**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1114292

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

**FILLARAMO, CHARLOTTE A
4035 NAPOLI RD.
PANAMA CITY FL 32405**

Name **Lee J. Kinner, PD**

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

7225 S. Lagoon Drive

City **Panama City Beach FL** Zip Code **32417**

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

Lee J. Kinner April 2, 2002

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPD** ☐ Delete
NAME **BOZARTH, JOHN**
STREET ADDRESS **100 CHERRY ST. UNIT #2**
CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **SHERMAN, TOM**
STREET ADDRESS **501 W 19TH ST**
CITY-ST-ZIP **PANAMA CITY FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☐ Delete
NAME **BLACK, BILL**
STREET ADDRESS **2555 HUNTCLIFF LANE**
CITY-ST-ZIP **PANAMA CITY FL 32405**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☒ Delete
NAME **BERRY, ERIC**
STREET ADDRESS **4131 W. 20TH COURT**
CITY-ST-ZIP **PANAMA CITY FL 32405**

TITLE ☒ Change ☐ Addition
NAME **VPD Jeff Johnson**
STREET ADDRESS **5301 Sunset Ave**
CITY-ST-ZIP **Panama City Beach FL 32408**

TITLE **SD** ☒ Delete
NAME **WALBY, EMILY**
STREET ADDRESS **4524 TROPICAL DR.**
CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE ☒ Change ☐ Addition
NAME **SD Kathy Stuart**
STREET ADDRESS **3415 Jenks Ave**
CITY-ST-ZIP **Panama City FL 32405**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **REDAURIBLACK**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-2002 (850) 784-9501

Date

Daytime Phone #

CR2E037 (9/01)