**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Aug 20, 2001 8:00 am Secretary of State **DOCUMENT # 708994** 1. Entity Name 08-20-2001 90071 001 \*\*\*\*70.00 BAY COUNTY ASSOCIATION OF REALTORS, INC. Principal Place of Business Mailing Address 1123 HARRISON AVE. 1123 HARRISON AVE. A0082072 PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1440029 Not Applicable Country Zip \$8.75 Additional 5.~Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELEANOR BURROSS **ELEANOR, BURROSS** Street Address (P.O. Box Number is Not Acceptable) 1123 HARRISON AVE. PANAMA CITY FL 32401 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to After September 12, 2001, min. will be \$236.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (5/01)TITLE TITLE ☐ Delete PRESIDENT K Change ☐ Addition CRECELIUS, ROY NAME NAME VIDER, JAMES C. STREET ADDRESS 3312 COUNTY CLUB DR STREET ADDRESS **CR2E037** 8017 N. LAGOON DRIVE CITY-ST-ZIP LYNN HAVEN FL 32444 CITY-ST-ZIP PANAMA CITY BEACH, FL 32408-5263 TITLE ☐ Delete TITI F Change Addition PRESIDENT-ELECT VIDER, JAMES NAME NAME STECKBAUER, BILL STREET ADDRESS 8017 N LAGOON DR STREET ADDRESS 702-S: TYNDALL PKWY -CITY-ST-ZIP PANAMA CITY BCH FL 32408 CITY-ST-ZIP PANAMA CITY, FL 32404 TITLE ☐ Delete TITLE Change ☐ Addition TREASURER NAME REMIANS, EARL GEIL NAME GEIL, EARL STREET ADDRESS 10997 HUTCHINSON BLVD STREET ADDRESS 10997 HUTCHINSON BLVD CITY-ST-ZIP PANAMA CITY BEACH FL 32407 CITY-ST-ZIP <u>PANAMA CITY BEACH, FL</u> TITLE ☐ Delete TITLE SECRETARY X Change ☐ Addition NAME STECKBAUER, BILL NAME WISELOGEL, JIMMY STREET ADDRESS 702 S TYNDALL PKWY STREET ADDRESS 214 WISTERIA STREET CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32404 <u>PANAMA\_CITY\_BEACH.\_FL\_\_32407</u> TITLE TITLE ☐ Delete X Change ☐ Addition DIRECTOR DUNNIGAN, DANA P NAME NAME LEDESMA, JENNIFER STREET ADDRESS 3610 W O'HENRY DR. STREET ADDRESS 5317 SUNSET AVENUE CITY-ST-ZIP PANAMA CITY FL 32408 CITY-ST-ZIP PANAMA CITY BEACH, FL 32408 TITLE ☐ Delete TITLE X Change ☐ Addition DIRECTOR NAME MORGAN, DOREEN NAME REVELL, JO ANN STREET ADDRESS 8212 THOMAS DR STREET ADDRESS 144 PORTER DRIVE CITY-ST-ZIP

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:

PANAMA CITY BEACH FL 32408

8/14/01

FL 32413

PANAMA CITY BEACH.

(850)763-7843