

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90154 008 ****70.00

DOCUMENT # 708994

1. Entity Name

BAY COUNTY ASSOCIATION OF REALTORS, INC.



Principal Place of Business

**1123 HARRISON AVE.
PANAMA CITY FL 32401**

Mailing Address

**1123 HARRISON AVE.
PANAMA CITY FL 32401**

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 **59-1440029**

Applied For
Not Applicable

5. Certificate of Status Desired **XX**

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**ELEANOR, BURROSS
1123 HARRISON AVE.
PANAMA CITY FL 32401**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Eleanor Burross* ASSOCIATION EXECUTIVE 1/13/03
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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **S.** ☒ Delete
NAME **WISELOGEL, JIMMY**
STREET ADDRESS **214 WISTERIA STREET**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32407**

TITLE **P.** ☒ Delete
NAME **STECKBAUER, BILL**
STREET ADDRESS **702 S. TYNDALL PKWY**
CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **T.** ☒ Delete
NAME **GEIL, EARL**
STREET ADDRESS **10997 HUTCHINSON BLVD**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32407**

TITLE **PE** ☒ Delete
NAME **STECKBAUER, BILL**
STREET ADDRESS **702 S TYNDALL PKWY**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32404**

TITLE **D.** ☒ Delete
NAME **LEDESMA, JENNIFER**
STREET ADDRESS **5317 SUNSET AVE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE **D.** ☒ Delete
NAME **REVELL, JO ANN**
STREET ADDRESS **144 PORTER DRIVE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32413**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **JIMMY WISELOGEL**
STREET ADDRESS **214 WISTERIA STREET**
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32407**

TITLE **PRESIDENT-ELECT** ☐ Change ☒ Addition
NAME **JO ANN REVELL**
STREET ADDRESS **144 PORTER DRIVE**
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32413**

TITLE **SECRETARY** ☐ Change ☒ Addition
NAME **VICKI SWENK**
STREET ADDRESS **4271 KINGFISH LANE P.O. BOX 27294**
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32411**

TITLE **TREASURER** ☐ Change ☒ Addition
NAME **ROY HINDERLITER**
STREET ADDRESS **3912 VICAR STREET**
CITY-ST-ZIP **PANAMA CITY BEACH, FL 32408**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **ALAN SWIGLER**
STREET ADDRESS **719 BEACHCOMBER DRIVE**
CITY-ST-ZIP **LYNN HAVEN, FL 32444**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **DOREEN MORGAN**
STREET ADDRESS **1511 COLORADO AVENUE**
CITY-ST-ZIP **LYNN HAVEN, FL 32444**

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: *Jo Ann Revell* President

1/13/03

(850) 763-7843

CR2E037 (10/02)