

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712943

1. Entity Name

WOMEN'S CIVIC CLUB OF WEST PANAMA CITY BEACH, FL

Principal Place of Business

P O BOX 9759
PANAMA CITY BCH FL 32417

Mailing Address

P O BOX 9759
PANAMA CITY BCH FL 32417

2. Principal Place of Business

3. Mailing Address

P.O. Box 9759

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Panama City Beach, FL

City & State

Panama City Beach, FL

Zip

Country

Zip
32417

Country

USA

4. FEI Number

59-2368315

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

OBERST, GAYLE
208 OLEANDER CRICLE
PANAMA CITY FL 32413

Name

~~Janet T. Roan~~ Janet T. Roan

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

6323 Thomas Dr #1103

City

Panama City Beach

FL

Zip Code

32408

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

Janet T. Roan

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	OBERST, GAYLE	
STREET ADDRESS	208 OLEANDER CIRCLE	
CITY-ST-ZIP	PANAMA CITY FL 32413	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	GRESSLE, ELOISE	
STREET ADDRESS	7437 BEACH DRIVE	
CITY-ST-ZIP	PANAMA CITY FL 32408	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	SWARTZ, MARTY	
STREET ADDRESS	113 NAUTICAL WAY	
CITY-ST-ZIP	PANAMA CITY FL 32413	
TITLE	RST	<input type="checkbox"/> Delete
NAME	DU MONT, ELIZABETH	
STREET ADDRESS	6323 THOMAS DRIVE 703	
CITY-ST-ZIP	PANAMA CITY FL 32408	
TITLE	T	<input type="checkbox"/> Delete
NAME	PARR, FAITH	
STREET ADDRESS	6323 THOMAS DR, #802	
CITY-ST-ZIP	PANAMA CITY FL 32408	
TITLE	CST	<input type="checkbox"/> Delete
NAME	FAYE, KABACI	
STREET ADDRESS	128 SERENADE LANE	
CITY-ST-ZIP	PANAMA CITY FL 32413	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Janet Roan	
STREET ADDRESS	6323 Thomas Drive #1103	
CITY-ST-ZIP	Panama City Beach FL 32408	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joan Wilson	
STREET ADDRESS	546 N, Lakeshore Dr	
CITY-ST-ZIP	Panama City Beach FL 32413	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	June Wetzel	
STREET ADDRESS	21507 Caribbean Lane	
CITY-ST-ZIP	Panama City Beach FL 32413	
TITLE	RST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Virginia Lindley	
STREET ADDRESS	6324 Pine Drive	
CITY-ST-ZIP	Panama City Beach FL 32408	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Elizabeth du Mont	
STREET ADDRESS	6323 Thomas Drive #703	
CITY-ST-ZIP	Panama City Beach FL 32408	
TITLE	CST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dorothy Bellus	
STREET ADDRESS	1640 Acre Circle	
CITY-ST-ZIP	Panama City Beach FL 32407	

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: *Elizabeth du Mont* Elizabeth du Mont, Treasurer

3 May 2001

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91079 050 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)