

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 16, 2000 8:00 am
Secretary of State

05-16-2000 90032 049 ****61.25

DOCUMENT # 717476

1. Entity Name

BUILDING INDUSTRY ASSOCIATION OF OKALOOSA-WALTON

Principal Place of Business

1980 LEWIS TURNER BLVD
 FORT WALTON BEACH FL 32547-1217

Mailing Address

1980 LEWIS TURNER BLVD
 FORT WALTON BEACH FL 32547-1217

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

59-1900233

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fees Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

DEAMES, BILLY E
 1459 EMERALD BAY DRIVE
 DESTIN FL 32541

7. Name and Address of New Registered Agent

Name **PATTERSON, MALCOLM L**
 Street Address (P.O. Box Number is Not Acceptable) **1980 LEWIS TURNER BLVD.**
 City **FT. WALTON BEACH FL** Zip Code **32547**

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

Malcolm L. Patterson

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

(NOTE: Registered Agent signature required when reinstating)

4/25/00

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CREWS, TERRY L 11714 W EMERALD COAST PKWY DESTIN FL 32541	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS, FREDERICK W. 102 DRIFTWOOD AVE #7 FT. WALTON BEACH FL 32548	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOFF, RICK L. 4980 S FERDON BLVD CRESTVIEW FL 32536	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONNER, BRENDA 13 KELLY AVE NE FORT WALTON BEACH FL 32548	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEAMES, BILLY E 1459 EMERAL BAY DRIVE DESTIN FL 32541	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DALTON, JOHN P.O. BOX 1671 SAUTA ROSA BCH, FL 32459	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SIMS, SANDY 1057 JOHN SIMS PKWY. NIRVILLE, FL 32578	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATTERSON, MALCOLM L. 1980 LEWIS TURNER BLVD. FT. WALTON BEACH, FL 32547	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Malcolm L. Patterson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00 850/863-5107

DATE

Daytime Phone #

CR2E037 (9/99)