

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **719551** (4)

1. Corporation Name

SAVE OUR BEACH, INCORPORATED



Principal Place of Business

Mailing Address

P O BOX 9642
PANAMA CITY BCH FL 32417

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PANAMA CITY BCH FL 32417

3. Date Incorporated or Qualified
10/21/1970

3a. Date of Last Report
03/20/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

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4. FEI Number
59-2934669

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ULLMAN, A GARY
5811 PINETREE AVENUE
PANAMA CITY BCH FL 32407

81 Name
GREAT HOUSE, JOHN

82 Street Address (P.O. Box Number is Not Acceptable)
14006 BAY AVE.

83 **PANAMA CITY BEACH**

84 City

FL

85 Zip Code
32413

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

John Great House

(NOTE: Registered Agent's signature required when reinstating)

4/1/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **BRADBURY, GAIL**
STREET ADDRESS **109 SEACLUSION DRIVE**
CITY-ST-ZIP **PANAMA CITY BCH FL**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **GREAT HOUSE, JOHN**
1.3 STREET ADDRESS **14006 BAY AVE.**
1.4 CITY-ST-ZIP **PANAMA CITY BCH, FL**

TITLE **VPD** ☐ DELETE
NAME **TAYLOR, FREDRICK M.**
STREET ADDRESS **14102 MILLCOLE AVE.**
CITY-ST-ZIP **PANAMA CITY BEACH FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **STD** ☐ DELETE
NAME **BRADBURY, GAIL**
STREET ADDRESS **109 SEACLUSION DRIVE**
CITY-ST-ZIP **PANAMA CITY BCH FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **ULLMAN, A GARY**
STREET ADDRESS **5811 PINETREE AVENUE**
CITY-ST-ZIP **PANAMA CITY BCH, FL 00000**

4.1 TITLE **FRANK LANGE** ☐ Change ☒ Addition
4.2 NAME **140 SEACLUSION DR**
4.3 STREET ADDRESS **PANAMA CITY BEACH FL**
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gail Bradbury
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GAIL BRADBURY 4-1-96 904-233-1592
Date Daytime Phone #

CR2E037 (12/95)