

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725513

1. Entity Name

SHADDAI TEMPLE BUILDING ASSOCIATION, INC.

**FILED**  
**Jun 09, 2000 8:00 am**  
**Secretary of State**

06-09-2000 90029 013 \*\*\*\*61.25

Principal Place of Business

1101 W 19TH ST  
PO BOX 16115  
PANAMA CITY FL 32406-6115

Mailing Address

1101 W 19TH ST  
PO BOX 16115  
PANAMA CITY FL 32406-6115

2. Principal Place of Business

3. Mailing Address

P.O. Box 1238

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
panama city, FL

4. FEI Number

59-2477193

Applied For

Not Applicable

Zip

Country

Zip

Country

32402

USA

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

GASKIN, DAVID C  
WEWAHITCHKA ST. BANK BLDG-MAIN ST  
P O BOX 185  
WEWAHITCHKA FL 32465

Name

Richard Albritton, Esq.

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

1042 Jenks Ave.

City

Panama City

FL

Zip Code  
32401

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  
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 ☒ Delete  
NAME CAZENAVE, FRED F SR  
STREET ADDRESS 124 GRAND HERON DRIVE  
CITY-ST-ZIP PANAMA CITY BEACH FL

TITLE D ☒ Change ☐ Addition  
NAME SIMMONS, RALPH  
STREET ADDRESS 2513 Dorothy Ave.  
CITY-ST-ZIP Panama City, FL 32407

TITLE S ☐ Delete  
NAME MILLER, RONALD R  
STREET ADDRESS 807 MARYWOOD DR  
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME PARKS, WILLIAM R  
STREET ADDRESS 2411 W 33RD ST  
CITY-ST-ZIP PANAMA CITY FL

TITLE PD ☒ Change ☐ Addition  
NAME PARKS, WILLIAM R.  
STREET ADDRESS 2411 W 33rd St.  
CITY-ST-ZIP Panama City, FL 32405

TITLE T ☒ Delete  
NAME CHURCHWELL, H P  
STREET ADDRESS 100 HERON TURN  
CITY-ST-ZIP PANAMA CITY BEACH FL

TITLE T ☒ Change ☐ Addition  
NAME BAAS, H. RON  
STREET ADDRESS 1808 New Jersey Ave.  
CITY-ST-ZIP Lynn Haven, FL 32444

TITLE D ☒ Delete  
NAME GRIFFITH, BILL A  
STREET ADDRESS 2017 WILLOWBEND LANE  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE D ☒ Change ☐ Addition  
NAME CHRISTMAS, BEN  
STREET ADDRESS 101 Harbour Pointe Dr.  
CITY-ST-ZIP Lynn Haven, FL 32444

TITLE D ☐ Delete  
NAME MITCHELL, DAVE  
STREET ADDRESS 4542 BOLLINGER RD  
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE VP ☒ Change ☐ Addition  
NAME MITCHELL, DAVE E.  
STREET ADDRESS 4542 Bollinger Road  
CITY-ST-ZIP Panama City, FL 32404

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 6, 2000 850-763-6090

Date

Daytime Phone #

CR2E037 (9/99)