

# 2000 UNIFORM BUSINESS REPORT (UBR)

8/31

FILED

Sep 21, 2000 8:00 am  
Secretary of State

08-30-2000 90005 025 \*\*\*\*61.25

DOCUMENT # 731866

1. Entity Name

THE CIVTAN CLUB OF PANAMA CITY, FLORIDA, INC. *f*

Principal Place of Business

Mailing Address

611 N EAST AVE  
PANAMA CITY FL 32401

P.O. BOX 1667  
PANAMA CITY FL 32402-1667

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

59-1838445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TINDER, JUDY  
148 N TYNDALL PKWY  
PANAMA CITY FL 32404

Name *Wayne M. Bretenbacher*

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

*3939 W. 21ST PLACE*

City *Panama City*

FL

Zip Code *32405*

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

*Wayne M. Bretenbacher*

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

(NOTE: Registered Agent signature required when reinstating)

*28 Aug 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME FARVOR, JEFF  
STREET ADDRESS 611 N EAST AVE  
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE *VP* ☒ Change ☐ Addition  
NAME *Steve Long*  
STREET ADDRESS *1414 Dunnett Rd.*  
CITY-ST-ZIP *Lynn Haven, FL 32444*

TITLE *SD* ☐ Delete  
NAME BECK, BARBARA  
STREET ADDRESS 1609 MAINE AVE  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE *SD* ☐ Change ☐ Addition

TITLE *TD* ☐ Delete  
NAME COOK, VICKIE  
STREET ADDRESS 504 VIRGINIA AVE  
CITY-ST-ZIP LYNN HAVEN FL 32446

TITLE *TD* ☒ Change ☐ Addition  
NAME *Wayne M. Bretenbacher*  
STREET ADDRESS *3939 W. 21st Pl*  
CITY-ST-ZIP *Panama City, FL 32405*

TITLE P ☐ Delete  
NAME BECK, ROBERT  
STREET ADDRESS 1609 MAINE AVE  
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ 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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)