

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737320

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** HOME BUILDERS ASSOCIATION OF PANAMA CITY-BAY COUNTY, INC.

**Current Principal Place of Business:**

2428 LISEBY AVENUE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 979  
PANAMA CITY, FL 32402

**New Mailing Address:**

FEI Number: 59-1584523

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JESSICA SUMMERS, ADMINISTRATOR  
2428 LISEBY AVENUE  
PANAMA CITY BCH, FL 32405 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILLIAMS, TODD  
Address: 1217 HARRISON AVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: FEENEY, TIM  
Address: 1229 AIRPORT RD  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: BALKCOM, ROBERT L  
Address: 110 N COVE TERR  
City-St-Zip: PANAMA CITY, FL 32401

Title: D  
Name: FEENEY, GLORIA  
Address: PO BOX 59950  
City-St-Zip: PANAMA CITY, FL 32412

Title: P  
Name: ANDERSON, GARRETT  
Address: 2800 W 30TH CT  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: LEDMAN, TOM  
Address: 121 GWYN DR STE A  
City-St-Zip: PANAMA CITY, FL 32408

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GARRETT ANDERSON

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02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date