

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741615

FILED  
Jan 18, 2008  
Secretary of State

Entity Name: PANAMA CITY DIVE CLUB, INC.

## Current Principal Place of Business:

316 PALM BEACH DRIVE  
PANAMA CITY BEACH, FL 32413 US

## New Principal Place of Business:

211 LAVALENCIA CIRCLE  
PANAMA CITY BEACH, FL 32413 US

## Current Mailing Address:

P.O. BOX 35146  
PANAMA CITY, FL 32412 US

## New Mailing Address:

FEI Number: 59-2250006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIBBS, BARRY  
316 PALM BEACH DRIVE  
PANAMA CITY BEACH, FL 32413 US

## Name and Address of New Registered Agent:

GIBBS, BARRY  
211 LAVALENCIA CIRCLE  
PANAMA CITY BEACH, FL 32413 US

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: \_\_\_\_\_

01/18/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GIBBS, BARRY  
Address: 316 PALM BEACH DRIVE  
City-St-Zip: PANAMA CITY, BEACH, FL 32413 US

Title: VP ( ) Delete  
Name: WEBER, PAT  
Address: 8420 LYDIA LN  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: T ( ) Delete  
Name: GIBBS, KAREN  
Address: 316 PALM BEACH DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: R ( ) Delete  
Name: LOGSDON, BILL  
Address: 189 TREASURE PALM DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: ND ( ) Delete  
Name: LIPSCOMB, CHAN  
Address: 1310 RHODE ISLAND AVE  
City-St-Zip: LYNN HAVEN, FL 32444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GIBBS, BARRY  
Address: 211 LAVALENCIA CIRCLE  
City-St-Zip: PANAMA CITY, BEACH, FL 32413 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: GIBBS, KAREN  
Address: 211 LAVALENCIA CIRCLE  
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARRY GIBBS

PRES

01/18/2008

Electronic Signature of Signing Officer or Director

Date