PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2	RPORATION ISTATEMENT		DEPAR Katheria Secretar	n é Harr i y of Sta	i s te	TE	(01 AUG	ILEI 27 p	M 2: 56				
DOCUMENT #759715 1. Corporation Name Panama City Beach Festivals, Inc. 2. c. son							TA	EGRETY SELAHA	RY OF SSEE, F	STATE LORIDA				
2. Principa	3. Mailing (3. Mailing Office Address												
P. O. 1	Box 9380	P. 0.	P. O. Box 9380											
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.						2 - 10° - d	-		A. C. A. STOTT P. TURANA. 1. F	_	
City & State		City-& State	City & State					14. Date Incorporated or Qualified To Do Business in Florida						
	City Beach, FL 34.77		Panama City Beach, FL					er5q=	320643	34=	-	plied For		
Zip	Country	Zip		Country			6.			S8 75 Ad	in progress	Fee requi		
3240	07 USA	3240	7	rose a	USA		CERTIFICAT	E OF STATU	S DESIRED			e of Status		
McCardle, Harold														
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob Signature of Registered Agent REGISTERED AGENT MUST SIGN								bligations of section 607.0505 or 617.0503, F.S. Date						
9. Names	and Street Addresses of Each Officer a	ınd/or Director (Flo	orida nonpro	fit corporati	ons must lis	it at lea	st 3 directors)		t de la companya de la constanta de la constan			e estitution		
Titles	Name of Officers and/or Directo	Street Address of Each Officer and/or Director					City / State / Zip							
c/ <i>D</i>	Billy Still	17756 Front Beach Road				1	Panama	_City	Beach,	_FL_	_3241:	3.		
2P/D	Don Shafer	13911 Panama City Bea				ch Pkwy	Panan	a City	-Beach;	-FL-	32407	<u>'-</u>		
₹/⊅	Pat Hand			14700 Front Beach Road				Panam	a City	,Beach,	FL	32413	,	
T/D	Harold McCardle	17462 Front Beach Roa			d	Panam	a City	Beach,	FL	3241	.3			
s/D	Paul Cox	· .	14401.	Front	Beach	Roa	d	Panama	a City	Beach,	FL_	32413	<u> </u>	
this rein owed b	that I am an officer or director or the re- nstatement application, the reason for di y the corporation have been paid and the application is true and accurate, and my	ssolution has beer e names of individ	n eliminated, uals listed o	the corpora n this form	ate name sa do not qualif	tisfies to ty for an	he requirements rexemption und	of section (307.0401 or	617.0401, F.:	S., that	all fees		

Daytime Phone #

SIGNATURE: DOMALD SUPER DOMALD H SHAFER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR