

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 21 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 760023 (2)

1. Corporation Name

PANHANDLE DARTING ASSOCIATION, INC.

Principal Place of Business

2300 W. MICHIGAN AVE.
UNIT 3
PENSACOLA FL 32526

Mailing Address

2300 W. MICHIGAN AVE.
UNIT 3
PENSACOLA FL 32526

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/14/1981

3a. Date of Last Report
06/24/1994

4. FEI Number
59-2890487

Applied For
Not Applicable

2. Principal Place of Business

21 6119 CONFEDERATE DR 26 6119 CONFEDERATE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 PENSACOLA, FL. 28 PENSACOLA, FL.

Zip

Country

Zip

Country

24 32503 25 ESCAMBIA

29 32503 30 ESCAMBIA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BUDD, ROBERT C
2300 WEST MICHIGAN AVE.
UNIT THREE
PENSACOLA FL 32526

10. Name and Address of New Registered Agent

81 Name HOWARD COOKE JR.
82 Street Address (P.O. Box Number is Not Acceptable)
6119 CONFEDERATE DR.
83
84 City PENSACOLA FL 85 Zip Code 32503

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BUDD, ROBERT C
STREET ADDRESS 2800 W. MICHIGAN AVE, UNIT 3
CITY - ST - ZIP PENSACOLA FL 32526

TITLE STD
NAME CAMPBELL, BETH
STREET ADDRESS 7333 PINE FOREST RD. #190
CITY - ST - ZIP PENSACOLA FL 32526

TITLE VD
NAME SHWARTZ, LEON
STREET ADDRESS P.O. BOX 37387 N/A
CITY - ST - ZIP PENSACOLA FL 32526

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE HOWARD COOKE JR. ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 6119 CONFEDERATE DR.
1.4 CITY - ST - ZIP PENSACOLA, FL. 32503

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HOWARD E. COOKE JR. HOWARD COOKE JR. March 22 1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Printed Name