

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768688

1. Entity Name

PURCHASING MANAGEMENT ASSOCIATION OF NORTH WEST

**FILED**  
**Mar 17, 2000 8:00 am**  
**Secretary of State**

03-17-2000 90010 034 \*\*\*\*61.25

Principal Place of Business

Mailing Address

ESCAMBIA COUNTY SCHOOL BOARD  
215 WEST GARDEN STREET  
PENSACOLA FL 32501  
US

P.O. BOX 1241  
PENSACOLA FL 32596-1241  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2448726

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOYER, BARRY  
215 WEST GARDEN STREET  
PENSACOLA FL 32501

Name

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

City

FL

Zip Code

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

*Barry Boyer*

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

(NOTE: Registered Agent signature required when reinstating)

2/10/00  
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 ☐ Delete  
NAME D  
STREET ADDRESS BOYER, BARRY  
CITY-ST-ZIP 215 WEST GARDEN STREET  
PENSACOLA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME VD  
STREET ADDRESS HALL, CAROLYN  
CITY-ST-ZIP 5151 N 9 AVE  
PENSACOLA FL 32504

TITLE ☒ Change ☐ Addition  
NAME VD  
STREET ADDRESS Joseph P. LITARY, Jr.  
CITY-ST-ZIP 223 So. PALAFOX PL. Rm #122  
Pensacola, FL 32501

TITLE ☒ Delete  
NAME VD  
STREET ADDRESS THOMAS, HELEN  
CITY-ST-ZIP 500 BAYFRONT PARKWAY  
PENSACOLA FL 32501

TITLE ☒ Change ☐ Addition  
NAME VD  
STREET ADDRESS Jayna D. Sanders  
CITY-ST-ZIP 2308 MAJESTIC DRIVE  
Pensacola, FL 32534

TITLE ☒ Delete  
NAME S  
STREET ADDRESS SCRIBNER, PATRICIA  
CITY-ST-ZIP 1176 FINCH DR  
GULF BREEZE FL 32561

TITLE ☒ Change ☐ Addition  
NAME VD  
STREET ADDRESS DOROTHY CUTTING  
CITY-ST-ZIP P.O. Box 87  
CANTONMENT, FL 32533

TITLE ☒ Delete  
NAME PD  
STREET ADDRESS COLLINS, TERESA  
CITY-ST-ZIP 8780 ELY ROAD  
PENSACOLA FL 32514

TITLE ☒ Change ☐ Addition  
NAME D  
STREET ADDRESS Bessie Maorer - Bradshaw  
CITY-ST-ZIP 223 So. Palafox Pl.  
PENSACOLA, FL 32501

TITLE ☒ Delete  
NAME TD  
STREET ADDRESS CUTTING, DOROTHY  
CITY-ST-ZIP CHAMPION INT'L  
CANTONMENT FL 32533

TITLE ☒ Change ☐ Addition  
NAME D  
STREET ADDRESS Jennifer E. Jackson-Gardner  
CITY-ST-ZIP 8771 ELY Road.  
Pensacola, FL 32514

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 like empowered.

SIGNATURE:

*Barry Boyer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/10/00 850-464-6202