

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G32062**

1. Entity Name

PANAMA CITY DIVE CENTER, INC.

Principal Place of Business

**4823 THOMAS DRIVE
PANAMA CITY BCH. FL 32408**

Mailing Address

**4823 THOMAS DRIVE
PANAMA CITY BCH. FL 32408**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**MILLSAP, LINDA
4909 HISPANIOLA ST
PANAMA CITY BEACH FL 32408**

7. Name and Address of New Registered Agent

Name **MaryLEE Fischer**
Street Address (P.O. Box Number is Not Acceptable)
4823 Thomas Dr.
City **Panama City Bch** FL Zip Code **32408**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **GOMEZ, MIGUEL R**
STREET ADDRESS **7022 SUNSET AVE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE **S** ☐ Delete
NAME **MCLENDON, JERRY**
STREET ADDRESS **7815 LAIRD STREET**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
500006067105--9
-06/27/02--01049--023
*****150.00 ***150.00**

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

02 JUN 17 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)

Attachment
Document #
G32062

Miguel R. Gomez
Panama City Dive Center, Inc.
4823 Thomas Drive
Panama City Beach, FL 32408
850/235-3390

June 11, 2002

Florida Department of State
Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sir / Ma'am:

I am writing to you regarding submission of a 2002 Uniform Business Report (UBR) for Panama City Dive Center, Inc. Our report was delinquent May 1, 2002. Enclosed you will find the remittance due at that time.

Please pardon our delinquency in this matter as the UBR was inadvertently filed with our 2001 Federal Income Tax documentation; an error we discovered today.

Sincerest regards,

Miguel R. Gomez

