

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G 78216

1. Entity Name

PANHANDLE DIVERS, INCORPORATED

FILED

May 22, 2001 8:00 am
Secretary of State

05-22-2001 90059 039 ***150.00

00056312

Principal Place of Business

PANAMA CITY MARINA
PIER 8 SKIP 23
PANAMA CITY, FL 32401
US

Mailing Address

7815 LAIRD ST,
PANAMA CITY BEACH, FL
US 32408

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2364986

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

MCLENDON, JERRY
7815 LAIRD STREET
PANAMA CITY BCH, FL 32408

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

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

PDT
PEREZ, GEORGE
121 Walnut Drive
Enterprise, AL 36330

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

VDS
ADAMS, R.C. (Roy)
218 Meadow Lake Drive
Ozark, AL 36360

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

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:

George Perez George Perez

11 MAY 01 (334) 774-3483

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)