

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2004 08:00 AM
Secretary of State

DOCUMENT # L40084

1. Entity Name
**THE ROCK CORPORATION OF PANAMA CITY BEACH,
INC.**



Principal Place of Business
**9322 FRONT BEACH RD
PANAMA CITY BCH, FL 32407 US**

Mailing Address
**9322 FRONT BEACH ROAD
434 MAGNOLIA AVE.
PANAMA CITY, FL 32401-3127 US**



01152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2984932

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ISLER, CHARLES S., III
434 MAGNOLIA AVE.
PANAMA CITY, FL 32402**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____
Signature typed or printed name of registered agent and the filer (NOTE: Registered Agent signature required when re-statuting) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROCK, BOBBIE
STREET ADDRESS	9322 FRONT BEACH RD.
CITY - ST - ZIP	PANAMA CITY BCH, FL
TITLE	D
NAME	ROCK, DAVID A.
STREET ADDRESS	9322 FRONT BEACH RD.
CITY - ST - ZIP	PANAMA CITY BCH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000006101670
04/02/04-80023-013 158.75

**DO NOT WRITE
IN THIS SPACE**

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 607, 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: *David Rock* **SECRET** **4/1/04** **276-3768**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #