

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90044 003 ****61.25

DOCUMENT # N04000002667

1. Entity Name

CELADON BEACH OWNER'S ASSOCIATION,
INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

17757 Front Beach Rd

Suite, Apt. #, etc.

3. Mailing Address

17757 Front Beach Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PCB, FL

City & State

PCB, FL

4. FEI Number

65-1220971

Applied For

Not Applicable

Zip

32413

Country

BAV

Zip

32413

Country

BAV

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Rob Blue, Jr.

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

221 McKenzie Avenue

City PANAMA CITY

FL

Zip Code

32402

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	Tommy Davis
STREET ADDRESS	P.O. Box 7787
CITY-ST-ZIP	Columbus, GA 32569
TITLE	Vice President
NAME	KATHRYN WALLIS
STREET ADDRESS	17757 Front Beach Rd, #1508
CITY-ST-ZIP	PCB, FL 32413
TITLE	SEC/TREASURER
NAME	ROY SIEGEL
STREET ADDRESS	120 PROVIDENCE LAKE POINT
CITY-ST-ZIP	ALPHARETTA, GA 30004
TITLE	DIRECTOR
NAME	SARAH CATER
STREET ADDRESS	17757 Front Beach Rd, #1905
CITY-ST-ZIP	PCB, FL 32413
TITLE	DIRECTOR
NAME	James Johnston
STREET ADDRESS	2208 Gany Stone Drive
CITY-ST-ZIP	Joilet, IL 60431
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert She Han

3/16/05

850-236-1965

CR2E037B (12/02)