

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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AND
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95 MAY -1 AM 7:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N04104 (8)

1. Corporation Name

LULLWATER BEACH CONDOMINIUM HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

301 LULLWATER DR.
PANAMA CITY BEACH FL 32413-2451

301 LULLWATER DR.
PANAMA CITY BEACH FL 32413-2451

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1984

3a. Date of Last Report

04/26/1994

4. FBI Number

59-2507671

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$9.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HESS, GLENN L.
9108 W. HWY. 98A
PANAMA CITY BCH. FL 32407

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME VERNON, DONALD - TERM EXPIRED
STREET ADDRESS 1970 NORTH 166TH STREET
CITY - ST - ZIP BROOKFIELD WI 53005

TITLE D
NAME BANKSTON, JAMES C
STREET ADDRESS 409 LULLWATER DR
CITY - ST - ZIP PANAMA C BCH FL

TITLE PD
NAME FLOOD, ANNE E. - TERM EXPIRED
STREET ADDRESS 2937 TABOR OAKS
CITY - ST - ZIP LEXINGTON KY

TITLE D
NAME JOHNSON, EUGENE
STREET ADDRESS 200 DEER CRK DR
CITY - ST - ZIP GENOA IL

TITLE T
NAME NICKENS, BOBBY - TERM EXPIRED
STREET ADDRESS 411 LULLWATER DR
CITY - ST - ZIP PANAMA CITY BCH FL

TITLE D
NAME VP
STREET ADDRESS Fred Bentley
CITY - ST - ZIP 8532 Old Harding Lane
Nashville, Tenn. 37221

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D Secretary ☒ Change ☐ Addition
12 NAME Katharine Dye
13 STREET ADDRESS 113 San Souci
14 CITY - ST - ZIP Panama City Beh., FL. 32413

21 TITLE D ☐ Change ☒ Addition
22 NAME Beverly Cox
23 STREET ADDRESS 1730 Thors Rokk Dr.
24 CITY - ST - ZIP Marietta, Ga. 30062

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed on my appointment with an address.

SIGNATURE: James C. Bankston, Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-95

904-235-3359