

DOCUMENT # N04104

1. Entity Name

LULLWATER BEACH CONDOMINIUM HOMEOWNERS' ASSOCIAT

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90023 048 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

301 LULLWATER DR.
PANAMA CITY BEACH FL 32413-2451

301 LULLWATER DR.
PANAMA CITY BEACH FL 32413-2453

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2507671

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

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

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME DYE, KATHARINE
STREET ADDRESS 113 SAN SOUCI
CITY-ST-ZIP PANAMA CITY FL 32413

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

TITLE DS ☐ Delete
NAME THOMPSON, SHEILA
STREET ADDRESS 425 LULLWATER DR
CITY-ST-ZIP P.C. BEACH FL 32413

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

TITLE D ☐ Delete
NAME PHILLIP, JAMES
STREET ADDRESS 219 N. STATE ST
CITY-ST-ZIP GENOA IL 60135

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

TITLE D ☐ Delete
NAME PEYTON, ROGER
STREET ADDRESS 671 EAST ARCH
CITY-ST-ZIP MADISONVILLE KY 42437

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

TITLE D ☐ Delete
NAME CALDWELL, HILDA
STREET ADDRESS 411 LULLWATER DRIVE
CITY-ST-ZIP PANAMA CITY FL 32413

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shelley Shore*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)