

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04706

FILED
Jan 08, 2010
Secretary of State

Entity Name: CLASSIC CRUISERS OF PANAMA CITY, INC.

Current Principal Place of Business:

4018 NAPOLI ROAD
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

PO BOX 1962
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 59-2672760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMENS, BILL
4008 E. 12TH COURT
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CREWS, BILL
Address: 4018 NAPOLI RD.
City-St-Zip: PANAMA CITY, FL 32405

Title: VP
Name: DUGGINS, JEFF
Address: 6105 BOATRACE ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: T
Name: CLEMENS, WILLIAM H
Address: 4008 E 12TH CT
City-St-Zip: PANAMA CITY, FL 32404

Title: D
Name: COLE, ROB
Address: 317 GREENWOOD DR.
City-St-Zip: PANAMA CITY, FL 32407

Title: S
Name: ANDERSON, KEN
Address: 147 CANDLE WICK CIR
City-St-Zip: PANAMA CITY, FL 32405

Title: D
Name: SURBER, MURIEL
Address: 4105 GAINES STREET
City-St-Zip: PANAMA CITY, FL 32404

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM H CLEMENS

T

01/08/2010

Electronic Signature of Signing Officer or Director

Date