# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000004940

1. Entity Name
PANAMA CITY PARROT HEAD CLUB, INC.

FILED
07 AUG -8 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Principal Place of Business | Mailing Address |
|---|---|
| 711 W BEACH DRIVE<br>PANAMA CITY, FL 32401 | P.O. BOX 1023<br>PANAMA CITY, FL 32402 |

08032007 Chg-NP CR2E037 (12/06)

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 20-1413697 ☐ Applied For ☐ Not Applicable

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 |
|---|---|
| RUSSELL, SUSANNA<br>4530 BAYWOOD DRIVE<br>LYNN HAVEN, FL 32444 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 100108202711 08/16/07--01047--016 **61.25
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Amended AR is $61.25**

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 | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>LANIER, BILL<br>316 HIDDEN ISLAND DR<br>PANAMA CITY BEACH, FL 32408 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>STEVE CAMP<br>8403 GULF PINES DR<br>PANAMA City BEAH, FL 32408 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>RUSSELL, SUSANNA<br>4530 BAYWOOD DR<br>LYNN HAVEN, FL 32444 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>LiLyAN LEWIS<br>306 W. BALEWIN Rd<br>PANAMA City, FL 32405 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>LANIER, SUSIE<br>316 HIDDEN ISLAND DR<br>PANAMA CITY BEACH, FL 32408 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>BRUCE LACLE<br>4221 HWY 98 W<br>PANAMA City, FL 32401 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>PARDY, KEN<br>117 ROWE AVE<br>PANAMA CITY, FL 32401 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | OD<br>KENT ADAMS<br>12309 HOUSER RD<br>PANAMA City, FL 32404 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | OD<br>KIRBY, KYLE<br>1104 E 3RD ST<br>PANAMA CITY, FL 32401 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>Kyle KiRBy<br>1104 E 3RD St<br>PANAMA City, FL 32401 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | OD<br>SMITH, MARY LOU<br>6405 N LAGOON DR<br>PANAMA CITY BEACH, FL 32408 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | OD<br>PATRICIA FRITCHIE<br>8809 Georgette STREET<br>PANAMA City Beach, FL 32407 | ☐ Change ☒ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** _____ BRUCE LACLE TREASURER 8-6-07 850-785-8275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #