

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05392

FILED
Jan 14, 2009
Secretary of State

Entity Name: PANAMA PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

17320 PCB PKWY
PANAMA CITY BEACH, FL 32413 US

New Principal Place of Business:

Current Mailing Address:

17320 PCB PKWY
PANAMA CITY BEACH, FL 32413 US

New Mailing Address:

7902 THOMAS DRIVE
PANAMA CITY BEACH, FL 32413 US

FEI Number: 59-2611005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, DIANNE S
7902 THOMAS DR
PANAMA CITY, FL 32408 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: T () Delete
Name: ADAMS, SHANNON E.
Address: 17320 P.C.B. PKWY SUITE # 207
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: DVP () Delete
Name: BARTA, JOHN
Address: 17320 PCB PKWY., #102
City-St-Zip: PANAMA CITY, FL 32413

Title: P () Delete
Name: MCINNIS, PROCTOR
Address: 17320 PCB PKWY, # 107
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: S () Delete
Name: HOOVER, PATTI
Address: 17320 PCB PKWY, # 109
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D (X) Delete
Name: BRIAND, MALCOLM
Address: 17320 PLB PKWY 206
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BARTA, JOHN
Address: 17320 PCB PKWY., #102
City-St-Zip: PANAMA CITY, FL 32413

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ADAMS, LISA
Address: 17320 P.C.B. PKWY SUITE # 111
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHARLIE ALLEN

CAM

01/14/2009

Electronic Signature of Signing Officer or Director

Date