

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N23652 (3)**

1. Corporation Name

**PANAMA CITY BEACH VISITOR AND CONVENTION BUREAU, INC.**

Principal Place of Business

Mailing Address

12015 FRONT BEACH ROAD  
STE 205  
PANAMA CITY BEACH FL 32407  
US

PO BOX 9473  
PANAMA CITY BEACH FL 32417-9473



3. Date Incorporated or Qualified

**11/30/1987**

3a. Date of Last Report

**03/07/1995**

4. FEI Number

**59-2866130**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CASON, TOM  
12015 FRONT BEACH ROAD  
STE. 205  
PANAMA CITY BEACH FL 32407**

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **C** ☐ DELETE

NAME **LANCASTER, REGGIE**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BEACH FL**

TITLE **D** ☐ DELETE

NAME **COVERT, GINA**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BCH. FL**

TITLE **D** ☒ DELETE

NAME **SWICORD, HANK**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BCH. FL**

TITLE **D** ☐ DELETE

NAME **HURST, RICK**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BCH FL**

TITLE **D** ☒ DELETE

NAME **ANDERSON, CARL**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BCH FL**

TITLE **D** ☐ DELETE

NAME **KAYLOR, KENNETH**  
STREET ADDRESS **12015 FRONT BEACH ROAD**  
CITY-ST-ZIP **PANAMA CITY BCH FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

**D / C** ☐ Change ☒ Addition

12 NAME

**Bense, Allan**

13 STREET ADDRESS

**12015 Front Beach Road**

14 CITY-ST-ZIP

**Panama City Beach FL 32407**

21 TITLE

**D** ☒ Change ☐ Addition

22 NAME

**Lancaster, Reggie**

23 STREET ADDRESS

**12015 Front Beach Road**

24 CITY-ST-ZIP

**Panama City Beach FL 32407**

31 TITLE

**D** ☐ Change ☒ Addition

32 NAME

**Stevens, Steve**

33 STREET ADDRESS

**12015 Front Beach Road**

34 CITY-ST-ZIP

**Panama City Beach FL 32407**

41 TITLE

**D** ☐ Change ☒ Addition

42 NAME

**Griffitts, Philip**

43 STREET ADDRESS

**12015 Front Beach Road**

44 CITY-ST-ZIP

**Panama City Beach FL 32407**

51 TITLE

**D** ☐ Change ☒ Addition

52 NAME

**Cook, Hoyt, Jr.**

53 STREET ADDRESS

**12015 Front Beach Road**

54 CITY-ST-ZIP

**Panama City Beach FL 32407**

61 TITLE

**D** ☐ Change ☒ Addition

62 NAME

**Powell, Raymond**

63 STREET ADDRESS

**12015 Front Beach Road**

64 CITY-ST-ZIP

**Panama City Beach FL 32407**

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 119.07(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 its 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, or on an attachment with an address.

SIGNATURE:

*Allan Bense*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/4/96**

Date

**904 769-3434**

Daytime Phone

CR2E037 (12/95)