

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N38985

1. Entity Name

PALM BAY HOMEOWNERS' ASSOCIATION, INC.

FILED

Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90134 017 ****61.25

Principal Place of Business

MIRACLE STRIP LOOP
12
PANAMA CITY BEACH FL 32407

Mailing Address

P.O. BOX 18318
PANAMA CITY BEACH FL 32417-8318
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3023461

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

SLOAN, TOMOTHY J
427 MCKENZIE AVENUE
PANAMA CITY FL 32402-2327

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 NAME STREET ADDRESS CITY - ST - ZIP	DV DOCTOR, MICHAEL 8212 GRAND PALM BLVD. PANAMA CITY BCH FL 32408	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP THOMPSON, HERMAN 8222 GRAND BAY BLVD PANAMA CITY BEACH FL 32408	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS DUCOTE, BECKY 8214 GRAND PALM BLVD. PANAMA CITY BEACH FL 32408	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SEILER, GEORGE A 108 PALM CROSSING PANAMA CITY BEACH FL 32408	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TILLEY, WILEY 138 PALM GROVE BLVD PANAMA CITY BEACH FL 32408	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S Vickers, Jan 8226 Grand Bay Boulevard Panama City Beach, FL 32408	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Commander, Kerry 8208 Grand Palm Boulevard Panama City Beach, FL 32408	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Schenck, George P. 114 Palm Crossing Boulevard Panama City Beach, FL 32408	☐ Change ☒ Addition

2. 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:

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-02

850-235-1008

Date

Daytime Phone #

CR2E037 (9/01)