2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45088

1. Entity Name
Panama City Junior Chamber of Commerce INC

APPROVED AND FILED

01 NOV 19 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100004694141--4
-11/27/01--01003--011
DO NOT WRITE IN THIS SPACE ***183.75

Principal Place of Business	Mailing Address
Timothy Campbell 222 E 4th St Panama city FL 32401	Timothy Campbell 222 E 4th St Panama city FL 32401

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 59-1034531 ☐ 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
	Name: Stacy Hammock Street Address (P.O. Box Number Is Not Acceptable): 8730 Thomas DR ste 1103-B City: Panama city Bch FL Zip Code: 32408

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: Stacy Hammock Stacy Hammock 11-15-01
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	DP Acoba, Lorna 2901 Kingswood DR P.C. FL 32405 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Stacy Hammock 425 Dolphin DR Panama city Beach FL 32413 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mitchum, Keith 4224 Pelen DR Panama city FL 32404 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jeffrey L Evans 8312 Palm Garden Blvd P.C.B. Bch 32408 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Campbell, Timothy 222 E 4th St Panama city 32405 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Kim Chalker 6428 Lake Johanna Cir. Panama city FL 32404 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Finley, Mah P Box 2751 Wausau FL 32463 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bill Kirkland 2518 S Hwy 77 Lynn Haven, FL 32444 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Gennis, Debbie 227 E 1st St P.C. FL 32405 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BoD Karen Mathis 4514 Carrison Rd Panama city FL 32404 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kirkland, Bill HWY 77 P.C. FL 32444 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (11/00)

12. 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: Stacy Hammock Stacy Hammock 11/15/01 850 233-3366
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #