## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000536

FILED Sep 21, 2012 Secretary of State

Entity Name: THE CARILLON BEACH INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

115 CARILLON MARKET ST SUITE 212

PANAMA CITY BEACH, FL 32413 US

Current Mailing Address: New Mailing Address:

115 CARILLON MARKET ST

SUITE 212

PANAMA CITY BEACH, FL 32413 US

FEI Number: 59-3159903 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHIPMAN, GARY A ESQ 1414 COUNTY HWY 283 S SHIPMAN, GARY A ESQ 60 CLUTE ATON LANE

SUITE B SUITE A

SANTA ROSA BEACH, FL 32413 US SANTA ROSA BEACH, FL 32459 US

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: GARY SHIPMAN 09/21/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PD

Name: PITTMAN, JAN
Address: 314 BEACHSIDE DR
City-St-Zip: CARILLON BEACH, FL 32413

Title: VD

Name: PASCHAL, JAMES
Address: 296 BEACHSIDE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VD

 Name:
 VAZQUEZ, DINO

 Address:
 400 BEACHSIDE DRIVE

 City-St-Zip:
 PANAMA CITY BEACH, FL 32413

Title: TD

Name: KIRCHER, PETER

Address: 150 W FLAGER ST SUITE 2050

City-St-Zip: MIAMI, FL 33130

Title: SD

Name: EAGAN, KENDALL
Address: 505 PINE RIDGE TRAIL
City-St-Zip: BIRMINGHAM, AL 35213

I hereby 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 all other like empowered.

SIGNATURE: JAMES PASCHAL VD 09/21/2012