

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90228 023 ****61.25

DOCUMENT # N94000001730



1. Entity Name
CAMP CREEK LAKE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
**409 PELICAN CIRCLE
PANAMA CITY BEACH FL 32413
US**

Mailing Address
**409 PELICAN CIRCLE
PANAMA CITY BEACH FL 32413
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3243326**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

**MEIER, HARRY G
409 PELICAN CIRCLE
PANAMA CITY FL 32413**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	COX, PEGGY	
STREET ADDRESS	1063 DOUGLAS RD	
CITY-ST-ZIP	HUNTSVILLE AL 35806	
TITLE	DV	<input type="checkbox"/> Delete
NAME	SHAFFER, JO	
STREET ADDRESS	4073 FIELD DR	
CITY-ST-ZIP	WHEAT RIDGE CO 80033	
TITLE	DS	<input type="checkbox"/> Delete
NAME	LOWRY, RICHARD	
STREET ADDRESS	233 PELICAN CIRCLE	
CITY-ST-ZIP	PANAMA CITY FL 32413	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SYLVAN, RICHARD	
STREET ADDRESS	923 RIVERCHASE TRAIL	
CITY-ST-ZIP	DULUTH GA 30096	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HARMON, CHARLES	
STREET ADDRESS	91 PELICAN CIRCLE	
CITY-ST-ZIP	PANAMA CITY FL 32413	
TITLE	D	<input type="checkbox"/> Delete
NAME	MEIER, HARRY	
STREET ADDRESS	409 PELICAN CIRCLE	
CITY-ST-ZIP	PANAMA CITY FL 32413	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ED SHERLING	
STREET ADDRESS	1540 DAUPHIN ST. EXT.	
CITY-ST-ZIP	ENTERPRISE, AL 36330	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIM WILLIAMS	
STREET ADDRESS	4421 HOCKADAY	
CITY-ST-ZIP	DALLAS, TX 75229	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WALTER ACRUE	
STREET ADDRESS	153 PELICAN CIRCLE	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARMON, CHARLES	
STREET ADDRESS	5145 BRADGREEN DR.	
CITY-ST-ZIP	NORCROSS, GA 30092	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEIER, HARRY	
STREET ADDRESS	409 PELICAN CIRCLE	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413	

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 fees empowered.

SIGNATURE: *Richard P. Lowry* REQUIRE **RICHARD P. LOWRY, 4/23/03 850-231-0023**

CR2E037 (10/02)