

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003085

1. Entity Name

NORTHWEST FLORIDA ECONOMIC DEVELOPMENT COALITION

FILED
Aug 24, 2000 8:00 am
Secretary of State

08-24-2000 90028 050 ****61.25

Principal Place of Business

ONE ENERGY PLACE
 PENSACOLA FL 32520-0231
 US

Mailing Address

P O BOX 457
 CHIPLEY FL 32428

A0074459



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
 Graceville, FL

4. FEI Number

59-3404738

Applied For

Not Applicable

Zip

Country

Zip

Country

32440

US

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

ELLIS, O. L. JR
 1297 FAIRWAY DR
 CHIPLEY FL 32428

Name
 Gary F. Clark

Street Address (P.O. Box Number is Not Acceptable)
 5282 Peanut Road

City
 Graceville

FL

Zip Code
 32440

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

8-22-00

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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 PD ☒ Delete
 NAME SAXON, MIKE
 STREET ADDRESS ONE ENERGY PLACE
 CITY-ST-ZIP PENSACOLA FL 32520-0234

TITLE PD ☐ Change ☒ Addition
 NAME Glen McDonald
 STREET ADDRESS 235 West 5th Street
 CITY-ST-ZIP Panama City, FL 32402

TITLE TD ☒ Delete
 NAME JOHN F DOUGHERTY III
 STREET ADDRESS 904 MAIN ST
 CITY-ST-ZIP CHIPLEY FL

TITLE SD ☐ Change ☒ Addition
 NAME Ted Clem
 STREET ADDRESS 235 West 5th Street
 CITY-ST-ZIP Panama City, FL 32402

TITLE D ☒ Delete
 NAME MCDONALD, TOMMY
 STREET ADDRESS 685 7TH ST
 CITY-ST-ZIP CHIPLEY FL 32428

TITLE TD ☐ Change ☒ Addition
 NAME Gary F. Clark
 STREET ADDRESS 5282 Peanut Road
 CITY-ST-ZIP Graceville, FL 32440

TITLE D ☒ Delete
 NAME POWELL, THOMAS L
 STREET ADDRESS 908 US HWY 90 N
 CITY-ST-ZIP DEFUNIAK SPRINGS FL 32540

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD ☒ Delete
 NAME FREY, MICHAEL
 STREET ADDRESS 117 W. GARDEN ST
 CITY-ST-ZIP PENSACOLA FL 32593-0550

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-22-00 850-263-3231

CR2E037 (5/00)