

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

FILED
Apr 10, 2003 8:00 am
Secretary of State

03-12-2003 90072 009 ****70.00

DOCUMENT # N97000001196

1. Entity Name

COME AS YOU ARE CLUB OF BAY COUNTY, INC.



Principal Place of Business

8317 FRONT BEACH RD. STE. 27
P.O. BOX 8945
PANAMA CITY BEACH FL 32417-0345

Mailing Address

P O BOX 8945
PANAMA CITY BEACH FL 32417-845
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BURSON, GENE
5091 PINE RIDGE DRIVE
CHIPLEY FL 32428

7. Name and Address of New Registered Agent

Name Robert R Austin
Street Address (P.O. Box Number is Not Acceptable)
4600 Kingfish LN unit 402
City Panama City FL Zip Code 32411

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

Robert R Austin Treasurer

03-08-03

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	NAME	MOORE, JAMES	☒ Delete
STREET ADDRESS			1704 FOSTER	
CITY-ST-ZIP			PANAMA CITY FL 32405	
TITLE	D	NAME	NESSLER, JOHN W	☒ Delete
STREET ADDRESS			121 PALM HARBOUR BLVD	
CITY-ST-ZIP			PANAMA CITY BEACH FL 32408	
TITLE	D	NAME	MCFALL, EDWARD	☒ Delete
STREET ADDRESS			115 1/2 E 15TH ST	
CITY-ST-ZIP			PANAMA CITY FL 32405	
TITLE	PD	NAME	BURSON, GENE	☒ Delete
STREET ADDRESS			5091 PINE RIDGE DRIVE	
CITY-ST-ZIP			CHIPLEY FL 32428	
TITLE	VPD	NAME	ROCK, DAVE	☒ Delete
STREET ADDRESS			9322 FRONT BEACH RD	
CITY-ST-ZIP			PANAMA CITY BEACH FL 32407	
TITLE	VPD	NAME	BARRY, TONY	☒ Delete
STREET ADDRESS			520 BECKRICH RD, UNIT #14	
CITY-ST-ZIP			PANAMA CITY BEACH FL 32407	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	NAME	Kathy Breau	☐ Change ☒ Addition
STREET ADDRESS			1816 Thomas DR.	
CITY-ST-ZIP			Panama City, FL 32408	
TITLE	D	NAME	VP Sylvia Peacock	☐ Change ☒ Addition
STREET ADDRESS			4403 Bay Point unit 403	
CITY-ST-ZIP			Panama City, FL 32411	
TITLE	D	NAME	VP Louis F Goodman	☐ Change ☒ Addition
STREET ADDRESS			13620 Peppin LN	
CITY-ST-ZIP			Panama City, FL 32409	
TITLE	D	NAME	S Linda Austin	☐ Change ☒ Addition
STREET ADDRESS			4600 Kingfish LN	
CITY-ST-ZIP			Panama City, FL 32411	
TITLE	D	NAME	T Robert Austin	☐ Change ☒ Addition
STREET ADDRESS			4600 King Fish LN	
CITY-ST-ZIP			Panama City, FL 32411	
TITLE		NAME		☐ Change ☒ Addition
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:

Robert R Austin

03-08-03

850-234-5911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)