

FILE NOW. FILING FEE IS \$61.25

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Apr 06, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000001843					
1. Corporation Name PANAMA CITY BEACH CONVENTION AND VISITORS BUREAU, INC.					
Principal Place of Business 12015 FRONT BEACH RD PANAMA CITY BEACH FL 32417			Mailing Address 12015 FRONT BEACH RD PANAMA CITY BEACH FL 32417		

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2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip Country		2a. Mailing Address 28 Suite, Apt. #, etc. 27 City & State 29 Zip Country		3. Date Incorporated or Qualified 03/30/1998 4. FEI Number 59-3507881 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent STARK, DANIEL 12015 FRONT BEACH RD PANAMA CITY BEACH FL 32417				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☒ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	BENSE, ALLAN	1.2 NAME	Russ Smith
STREET ADDRESS	PO BOX 2462 N/A	1.3 STREET ADDRESS	9450 S. Thomas Drive
CITY-ST-ZIP	PANAMA CITY FL 32402	1.4 CITY-ST-ZIP	Panama City Beach, FL 32408
TITLE	D ☒ DELETE	2.1 TITLE	D ☐ Change ☒ Addition
NAME	MAIKRANZ, JACK	2.2 NAME	John Gheesling III
STREET ADDRESS	1002 W 23RD ST, SUITE 400	2.3 STREET ADDRESS	11001 Front Beach Road
CITY-ST-ZIP	PANAMA CITY FL 32405	2.4 CITY-ST-ZIP	Panama City Beach, FL 32407
TITLE	D ☐ DELETE	3.1 TITLE	D ☐ Change ☒ Addition
NAME	NOLEN, MARC	3.2 NAME	Julian Bennett
STREET ADDRESS	8501 N LAGOON DR #100-310 W. 6th St.	3.3 STREET ADDRESS	P. O. Box 2422
CITY-ST-ZIP	PANAMA CITY BEACH FL 32408 32401	3.4 CITY-ST-ZIP	Panama City, FL 32402
TITLE	D ☐ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	STEVENS, STEVE	4.2 NAME	Philip Griffiths
STREET ADDRESS	5711 N LAGOON DR	4.3 STREET ADDRESS	110 S. Arnold Road
CITY-ST-ZIP	PANAMA CITY BEACH FL 32408	4.4 CITY-ST-ZIP	Panama City Beach, FL 32413
TITLE	D ☐ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME	LANCASTER, REGGIE	5.2 NAME	Hoyt Cook, Jr.
STREET ADDRESS	15524 FRONT BEACH RD	5.3 STREET ADDRESS	17281 Front Beach Road
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413	5.4 CITY-ST-ZIP	Panama City Beach, FL 32413
TITLE	D ☐ DELETE	6.1 TITLE	O ☐ Change ☒ Addition
NAME	PATRONIS, THEO	6.2 NAME	DAN STARK
STREET ADDRESS	5551 N LAGOON DR	6.3 STREET ADDRESS	12015 FRONT BEACH RD.
CITY-ST-ZIP	PANAMA CITY BEACH FL 32408-7915	6.4 CITY-ST-ZIP	PANAMA CITY BEACH FL 32407

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

3/30/99

850-238-5070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #