

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 27, 2006 8:00 am**  
**Secretary of State**

01-27-2006 90022 046 \*\*\*\*61.25

**60006879**



01042006 Chg-NP CR2E037 (11/05)

<b>DOCUMENT # N98000001843</b> 1. Entity Name <b>PANAMA CITY BEACH CONVENTION AND VISITORS BUREAU, INC.</b>					
Principal Place of Business <b>17001 PANAMA CITY BCH PKWY PANAMA CITY, FL 32413</b>			Mailing Address <b>P.O. BOX 9473 PANAMA CITY BEACH, FL 32417</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-3507881</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>WARREN, ROBERT L 17001-PANAMA CITY BCH PKWY PANAMA CITY, FL 32413</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, RUSS		NAME	Jason Oakes	
STREET ADDRESS	9450 S THOMAS DRIVE		STREET ADDRESS	12001 Front Beach Road	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32408		CITY-ST-ZIP	Panama City Beach, FL 32407	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	DC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PHILLIPS, ANDY		NAME	Lee Sullivan	
STREET ADDRESS	11212 FRONT BEACH ROAD		STREET ADDRESS	110 S. Arnold Road	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32407		CITY-ST-ZIP	Panama City Beach, FL 32413	
TITLE	DVC	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JONES, GARY		NAME	Mike Thomas	
STREET ADDRESS	1401 TROUT DRIVE		STREET ADDRESS	P. O. Box 1818	
CITY-ST-ZIP	PANAMA CITY, FL 32408		CITY-ST-ZIP	Panama City, FL 32402	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLACKERBY, ROBERT		NAME	Ken Nelson	
STREET ADDRESS	19806 PANAMA CITY BEACH PKWY		STREET ADDRESS	110 S. Arnold Road	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413		CITY-ST-ZIP	Panama City Beach, FL 32413	
TITLE	D	<input type="checkbox"/> Delete	TITLE	DST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KAHN, CODY		NAME	Bill Mathieu	
STREET ADDRESS	11127 FRONT BEACH ROAD		STREET ADDRESS	110 S. Arnold Road	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32407		CITY-ST-ZIP	Panama City Beach, FL 32413	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATRONIS, THEO		NAME	Jim Lawson	
STREET ADDRESS	5551 N LAGOON DR		STREET ADDRESS	323 Hidden Island Drive	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 324087915		CITY-ST-ZIP	Panama City Beach, FL 32408	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
<b>SIGNATURE:</b>			1/24/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

ATTACHMENT

6000 6879

# N9800000 1843

P

Addition

Robert L. Warren

17001 Panama City Beach Pkwy.

Panama City Beach, FL 32413