

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003987

1. Entity Name

THE BAY COUNTY CONSERVANCY, INC.

Principal Place of Business

Mailing Address

120 EAST 2ND PLACE
PANAMA CITY FL 32401

120 EAST 2ND PLACE
PANAMA CITY FL 32401-3221

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

7. Name and Address of New Registered Agent

HARBISON, CANDIS
120 EAST 2ND PLACE
PANAMA CITY FL 32401

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.

SIGNATURE

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME HARBISON, CANDIS
STREET ADDRESS 120 EAST 2ND PLACE
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE D ☐ Delete
NAME KOLK, JACALYN N ESQ.
STREET ADDRESS 160 BECK AVENUE
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE D ☐ Delete
NAME PARKER, AUDREY
STREET ADDRESS 1546 CINCINNATI AVE
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE D ☐ Delete
NAME GERDE, JERRY W ESQ.
STREET ADDRESS 239 E. 4TH STREET
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE D ☐ Delete
NAME AMESBURY, NATALIE
STREET ADDRESS 1115 EARL AVENUE
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE D ☐ Delete
NAME PARELL, G J
STREET ADDRESS 1115 EARL AVENUE
CITY-ST-ZIP PANAMA CITY FL 32401

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90061 003 ****61.25

00010048



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3511295

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

SIGNATURE: *Candis Harbison*

(850) 872-
1-12-2000 8260