

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90076 004 ****61.25

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3511295

Applied For

Not Applicable

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 -

**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 **D** ☐ Change ☒ Addition
 NAME **Lisa Keppner**
 STREET ADDRESS **4406 Garrison Road**
 CITY-ST-ZIP **Panama City FL 32404**

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

TITLE **D** ☐ Change ☒ Addition
 NAME **Carolyn Parell**
 STREET ADDRESS **402 Bunkers Cove Road**
 CITY-ST-ZIP **Panama City FL 32401**

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 **PAPELL, G J**
 STREET ADDRESS **1115 EARL AVENUE**
 CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE ☒ Change ☐ Addition
 NAME **PAPELL, G J**
 STREET ADDRESS **330 W. 23rd St.**
 CITY-ST-ZIP **Panama City FL 32405**

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:

Candis Harbison
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/02

850/872-8260

Date

Daytime Phone #

CR2E037 (9/01)