

FILE NOW: FILING FEE IS \$61.25

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90072 040 ****61.25

0010036

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000005409

1. Corporation Name

THE GROVES OF PANAMA CITY BEACH OWNERS ASSOCIATI
ON, INC.

5 2 4 9 2 6
524922 - 90072 - 40

Principal Place of Business
7205 THOMAS DR. E1203
PANAMA CITY BEACH FL 32408

Mailing Address
7205 THOMAS DR. E1203
PANAMA CITY BEACH FL 32408



2. Principal Place of Business

21 4123 Narsene Drive
Suite, Apt. #, etc.

2a. Mailing Address

26 4123 Narsene Drive
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

09/17/1998

4. FEI Number

Applied For

Applied For
 Not Applicable

City & State

23 Panama City Beach FL

City & State

28 Panama City Beach FL

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

Zip

24 32408

Country

25 USA

Zip

29 32408

Country

30 USA

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

APPLEBAUM, STEVEN L
9108 FRONT BEACH RD.
PANAMA CITY BEACH FL 32407

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 DELETE

TITLE PD
NAME ADAMS, ROBERT
STREET ADDRESS 7205 THOMAS DR., E1203
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE STD
NAME ADAMS, TERRY
STREET ADDRESS 7205 THOMAS DR., E1203
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE VPD
NAME MILLER, GREGG
STREET ADDRESS 7205 THOMAS DR., E1203
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 REQUIRED Terry Adams

4-22-99

850-230-9711

Date

Daytime Phone #

CR2E037 (11/98)