

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
Feb 28, 2005 08:00 AM  
Secretary of State

**DOCUMENT # N99000000965**

1. Entity Name  
PANAMA CITY PIPES AND DRUMS, INC.



Principal Place of Business

505 W. BALDWIN ROAD  
PANAMA CITY, FL 32405

Mailing Address

505 W. BALDWIN ROAD  
PANAMA CITY, FL 32405



02102005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3571596

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HIGBIE, TERRENCE J  
537 S BERTHE AVE  
CALLAWAY, FL 32404

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME GUEST, DAVID R  
STREET ADDRESS 505 W. BALDWIN ROAD  
CITY-ST-ZIP PANAMA CITY, FL 32405

TITLE VT  
NAME MCCURDY, KATHY  
STREET ADDRESS 2694 ISLAND VIEW DR.  
CITY-ST-ZIP PANAMA CITY, FL 32405

TITLE VT  
NAME KERR, RICK  
STREET ADDRESS 714 VIRGINIA AVENUE  
CITY-ST-ZIP LYNN HAVEN, FL 32444

TITLE S  
NAME EPLER, SALLY  
STREET ADDRESS 13122 AIRWAY DR.  
CITY-ST-ZIP PANAMA CITY, FL 32404

TITLE T  
NAME JONES, DAVID A  
STREET ADDRESS HC3-13418  
CITY-ST-ZIP MEXICO BEACH, FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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:

*David R. Guest* Pres. DAVID R. GUEST 26 Feb 05 914-9315  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #