2002 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N99000001129 Jan 29, 2002 8:00 am Secretary of State 1. Entity Name BAY COUNTY FAIR ASSOCIATION, INC. 01-29-2002 90006 002 ****61.25 CENTRAL PANHANDLE FAIR IN BAY COUNTY, INC. Principal Place of Business Mailing Address PO BOX 35007 2230 EAST 15TH STREET PANAMA CITY FL 32412 PANAMA CITY FL 32405 Mailing Address 2. Principal Place of Business 220 N. Mac Arthur Ave. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-2050667 32401 Not Applicable <u>Panama City</u> Country \$8.75 Additional Country .Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4448 Ada Drive JOHNSON, ROBERT 3907 W 20TH COURT PANAMA CITY FL 32405 City Chipley 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (9/01)☐ Addition TITLE ☐ Change ☐ Delete TITLE COOPER JR, W C NAME NAME 611 E 3RD COURT STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32401 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition X Change X Delete TITLE VICE: PRESIDENT TITLE HIYSON, JIM NAME NAME Robert Turner 5130 N LANGFORD DR STREET ADDRESS STREET ADDRESS 6148 Hwy.7 Chipley, F PANAMA CITY FL 32401 CITY-ST-ZIP CITY-ST-7IP CST---Change ☐ Addition CST = % X Delete TITLE TITLE EVANS, JOHN H Mark C. Cooper NAME NAME 220 N. Mac Arthur Ave. 1304 TENN AVE STREET ADDRESS STREET ADDRESS Panama City, FL LYNN HAVEN FL 32412 CITY-ST-ZIP CITY-ST-ZIP ▼ Change ☐ Addition TITLE ☐ Delete TITLE PRESIDENT Hendley. E e NAME NAME 1107 CLAY AVE STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32401 CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete JOHNSON, ROBERT NAME NAME 4448 Ada Drive 3907 W 20TH COURT STREET ADDRESS STREET ADDRESS Chipley, FL 32428 PANAMA CITY FL 32405 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change X Delete TITLE TITLE Cooper Jr. Joe NAME NAME 8412 JOHN PITTS RD STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32404 CITY-ST-ZIP

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.

CITY-ST-ZIE