

2000 UNIFORM BUSINESS REPORT (UBR)

4/4

FILED
May 22, 2000 8:00 am
Secretary of State

04-04-2000 90090 007 ****61.25

DOCUMENT # N99000003526

1. Entity Name

PALMBRANCH MISSIONS, INC.

Principal Place of Business

707 RIVERVIEW ROAD
 CARRABELLE FL 32322

Mailing Address

P.O. BOX 348
 CARRABELLE FL 32322-0348

NEW ADDRESS

2. Principal Place of Business

5920 DOUNERAY LOOP
 Suite, Apt. #, etc.

3. Mailing Address

SAME
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

CRYSTAL RIVER

City & State

FL

4. FEI Number

59-3586426

Applied For

Not Applicable

Zip

34429

Country

CITRUS

Zip

34429

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOCKE, CHARLES E
 707 RIVERVIEW ROAD
 CARRABELLE FL 32322

CHARLES E. Locke

Charles E. Locke

Name

CHARLES E. LOCKE

Street Address (P.O. Box Number is Not Acceptable)

5920 DOUNERAY LOOP

City

CRYSTAL RIVER

FL

Zip Code

34429

7. Name and Address of New Registered Agent

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

Louise M. Locke, SEC TREA

3-30-00

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

TITLE

D

☐ Delete

NAME

LOCKE, CHARLES E

STREET ADDRESS

707 RIVERVIEW ROAD

CITY-ST-ZIP

CARRABELLE FL 32322

TITLE

D

☐ Delete

NAME

LOCKE, LOUISE

STREET ADDRESS

707 RIVERVIEW ROAD

CITY-ST-ZIP

CARRABELLE FL 32322

TITLE

D

☐ Delete

NAME

PACKETT, JANET L

STREET ADDRESS

35 IRVIN LANGSTON RD.

CITY-ST-ZIP

CRAWFORDVILLE FL 32327

TITLE

☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

☒ Change

☐ Addition

NAME

5920 DOUNERAY LOOP

STREET ADDRESS

CRYSTAL RIVER, FL 34429

CITY-ST-ZIP

CRYSTAL RIVER, FL 34429

TITLE

☒ Change

☐ Addition

NAME

5920 DOUNERAY LOOP

STREET ADDRESS

CRYSTAL RIVER, FL 34429

CITY-ST-ZIP

CRYSTAL RIVER, FL 34429

TITLE

☐ Change

☐ Addition

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☐ 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:

LOUISE M. LOCKE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)