

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006545

1. Entity Name

THE PARKWAY LIONS FOUNDATION, INC.

Principal Place of Business

P O BOX 6471
PANAMA CITY FL 32404

Mailing Address

P O BOX 6471
PANAMA CITY FL 32404

2. Principal Place of Business

390 SOUTH TYNDALL PKWY
Suite, Apt. #, etc.
322

3. Mailing Address

390 S. TYNDALL PKWY.
Suite, Apt. #, etc.
322

City & State

PANAMA CITY, FL

City & State

PANAMA CITY, FL

Zip

32404

Country

BAY

Zip

32404

Country

BAY

4. FEI Number

59-3604036

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HENDRICKS, BRENDA G
6135 E HWY 98
PARKER FL 32404

7. Name and Address of New Registered Agent

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

TITLE D
NAME PRICE, EDWARD
STREET ADDRESS 6523 ENZOR STREET
CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

TITLE D
NAME BARNETT, JOHN
STREET ADDRESS 1322 DOVER ROAD
CITY-ST-ZIP PARKER FL 32404 ☐ Delete

TITLE D
NAME SMITH, JOHN
STREET ADDRESS 3215 N EAST AVE
CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SECRETARY
NAME JOE TIMMERMAN
STREET ADDRESS 6630 OLOKEE ST.
CITY-ST-ZIP PANAMA CITY, FL 32404 ☐ Change ☒ Addition

TITLE DIRECTOR
NAME MAF RODGERS
STREET ADDRESS 307 S. COMET AVE.
CITY-ST-ZIP PANAMA CITY, FL 32404 ☐ Change ☒ Addition

TITLE DIRECTOR
NAME AVA DOERLE
STREET ADDRESS 5908 BOAT RACE ROAD
CITY-ST-ZIP PANAMA CITY, FL 32404 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: MAF RODGERS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01

Date

(850) 871-2530

Daytime Phone #

CR2E037 (10/00)

0015841

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90339 030 ****61.25

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DO NOT WRITE IN THIS SPACE