

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006545

1. Entity Name

THE PARKWAY LIONS FOUNDATION, INC.

FILED

Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90169 040 ****61.25

Principal Place of Business

Mailing Address

390 SOUTH TYNDALL PKWY
322
PANAMA CITY FL 32404

390 SOUTH TYNDALL PKWY
322
PANAMA CITY FL 32404

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3604036 3122495

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HENDRICKS, BRENDA G
6135 E HWY 98
PARKER FL 32404

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE S
NAME TIMMERMAN, JOE
STREET ADDRESS 6630 OLOKEE ST
CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

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

TITLE D
NAME RODGERS, MAE
STREET ADDRESS 307 S COMET AVENUE
CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

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

TITLE D
NAME DOERLE, AVA
STREET ADDRESS 5908 BOAT RACE ROAD
CITY-ST-ZIP PANAMA CITY FL 32404 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

1-23-02 (850) 871-3855