2002 Uniform Business Report (UBR)

SIGNATURE: GAY K. LEVINS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Apr 17, 2002 8:00 am Secretary of State P00000016098 DOCUMENT # 1. Entity Name 04-17-2002 90040 025 ***150 PANAMA MACKS OF PCB FL, INC. Principal Place of Business Mailing Address 10510 FRONT BEACH ROAD. SUITE 157 10510 FRONT BEACH ROAD. SUITE 157 PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32407 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3607494 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent .7. Name and Address of New Registered Agent Name MADDOX, JOSEPH E Street Address (P.O. Box Number is Not Acceptable) **538 HARMON AVENUE** PANAMA CITY FL 32401 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete ST Change ☐ Addition TITLE NAME NAME LEVINS, JOHN W LEVINS. GAY K STREET ADDRESS STREET ADDRESS 10510 FRONT BEACH ROAD # 157 1115 FRIENDSHIP AVE CITY-ST-ZIP Panama City Beach FL 32407 CITY-ST-ZIP PANAMA CITY, FL 32401 TITLE VΡ ☐ Delete TITLE Change ☐ Addition NAME LEVINS, WESLEY M NAME STREET ADDRESS STREET ADDRESS 10510 FRONT BEACH ROAFD # 157 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32407 - X Delete ☐ Addition TITLE TITLE --Change 1997 - 294 - 275 NAME SHEFFIELD, CYNTHIA GAY L NAME STREET ADDRESS STREET ADDRESS 33931 LEE AVENUE CITY-ST-ZIP CITY-ST-ZIP LEESBURG FL 33034 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

04-08-2002

850-234-7896

FILED