

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90864 025 ***150.00

0048382 AV

DOCUMENT # P00000036415

1. Entity Name

VANTAGE POINT DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

**302 MOONLIGHT BAY DRIVE
 PANAMA CITY BEACH FL 32407**

**302 MOONLIGHT BAY DRIVE
 PANAMA CITY BEACH FL 32407**

2. Principal Place of Business

3. Mailing Address

13305 Panama City Bch. Pkwy.

13305 Panama City Beach Pkwy.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Panama City Beach, FL. 32407

City & State
Panama City Beach, FL. 32407

4. FEI Number
59-3640376

Applied For

Not Applicable

Zip
32407

Country
USA

Zip
32407

Country
USA

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

**CARR, MICHAEL V
 302 MOONLIGHT BAY DRIVE
 PANAMA CITY BEACH FL 32407**

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

Michael V. Carr, Pres.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	CARR, MICHAEL V	
STREET ADDRESS	302 MOONLIGHT BAY DRIVE	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARR, LIND E	
STREET ADDRESS	302 MOONLIGHT BAY DRIVE	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEPHENS, LARRY W	
STREET ADDRESS	1717 BROWN AVENUE	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEPHENS, TERESA A	
STREET ADDRESS	1717 BROWN AVENUE	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3602 Preserve Blvd.	
STREET ADDRESS	Panama City Beach, FL. 32408	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carr, Linda E.	
STREET ADDRESS	3602 Preserve Blvd.	
CITY-ST-ZIP	Panama City Beach, FL. 32408	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE:

Michael V. Carr, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/02 (850) 230-8812

Date

Daytime Phone #

CFE034 (9/01)