

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90238 049 ***150.00

DOCUMENT # *P02000067743*

1. Entity Name

THE PANAMA CORPORATION



DO NOT WRITE IN THIS SPACE

14021952

2. Principal Place of Business

8308 HIGH POINT RD.

Suite, Apt. #, etc.

3. Mailing Address

8308 HIGH POINT RD.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PANAMA CITY, FLORIDA

City & State

PANAMA CITY, FLORIDA

4. FEI Number

03-0468266

Applied For

Not Applicable

Zip

32404

Country

FL USA

Zip

32404

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JACK WILLIAMS

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

502 HARMON AVENUE

City

PANAMA CITY

FL

Zip Code

32401

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*P/V/T/S/D/C/M
BRENDA CALDWELL GEORGE
8308 HIGH POINT RD.
PANAMA CITY, FLORIDA 32404*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Caldwell George **BRENDA CALDWELL GEORGE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(850)

05-0104 872-4695

EXT. 68

CR2E034B (12/02)