

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90149 032 ***158.75

DOCUMENT # P02000069271

1. Entity Name
BOARDWALK BEACH REALTY, INC.



Principal Place of Business
**1002 W. 23RD STREET
SUITE 400
PANAMA CITY, FL 32405**

Mailing Address
**1002 W. 23RD STREET
SUITE 400
PANAMA CITY, FL 32405**

24003410



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04212004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
03-0467816

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**HENRY, ROBERT F III
1002 W. 23RD STREET
SUITE 400
PANAMA CITY, FL 32405**

Name **Lauretta J. Pippin**

Street Address (P.O. Box Number is Not Acceptable)
1002 W. 23rd St., Ste. 400

City **Panama City**

FL

Zip Code
32405

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

Lauretta J. Pippin

4/22/04
DATE

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

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

| | | |
|----------------|---------------------------|---------------------------------|
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | CHAPMAN CLEMO, MARY MARIE | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |
| TITLE | DP | <input type="checkbox"/> Delete |
| NAME | CHAPMAN, JOSEPH F IV | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | CHAPMAN, KRISTIAN B | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | CHAPMAN, DAVID M | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | CLEMO, SCOTT C | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |
| TITLE | S | <input type="checkbox"/> Delete |
| NAME | PHIPPIN, LAURETTA J | |
| STREET ADDRESS | 1002 W 23RD., STE 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|----------------------------|--|
| 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 | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | S | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PIPPIN, LAURETTA J. | |
| STREET ADDRESS | 1002 W. 23RD ST., STE. 400 | |
| CITY-ST-ZIP | PANAMA CITY, FL 32405 | |

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lauretta J. Pippin, Secretary

4/22/04

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #