

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000114934

1. Entity Name

RESORT ASSOCIATION MANAGEMENT, 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



02122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

01-0752428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIPPIN, LAURETTA
1002 W. 23RD STREET
SUITE 400
PANAMA CITY, FL 32405

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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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U00000939301
05/28/08-80021-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CHAPMAN, JOSEPH F III
STREET ADDRESS	1002 W. 23RD STE 400
CITY- ST- ZIP	PANAMA CITY, FL 32405
TITLE	V
NAME	CHAPMAN, JOSEPH F IV
STREET ADDRESS	1002 W. 23RD ST. STE 400
CITY- ST- ZIP	PANAMA CITY, FL 32405
TITLE	PT
NAME	HENRY, ROBERT F III
STREET ADDRESS	1002 W. 23RD ST. STE 400
CITY- ST- ZIP	PANAMA CITY, FL 32405
TITLE	S
NAME	PIPPIN, LAURETTA J
STREET ADDRESS	1002 W. 23RD ST. STE 400
CITY- ST- ZIP	PANAMA CITY, FL 32405
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
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 exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lauretta J. Pippin, Secretary

4/10/08

(850) 769-8981

Date

Daytime Phone #