

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035122

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** THE ASHLEY GROUP OF PANAMA CITY BEACH, INC.

**Current Principal Place of Business:**

17687 ASHLEY DR  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9088  
PANAMA CITY BCH, FL 32417

**New Mailing Address:**

**FEI Number:** 20-0782907

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRINGTON, TERESA A  
17687 ASHLEY DRIVE  
PANAMA CITY BEACH, FL 32413 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: COX, RICHARD L JR  
Address: PO BOX 9088  
City-St-Zip: PANAMA CITY BCH, FL 32417

Title: DV ( ) Delete  
Name: SEAMON, MICHAEL  
Address: 1410 THURSO ROAD  
City-St-Zip: LYNN HAVEN, FL 32444

Title: DS ( ) Delete  
Name: FLEMING, DARRELL  
Address: 124 RUSTY GANS DR  
City-St-Zip: PANAMA CITY BCH, FL 32408

Title: DT ( ) Delete  
Name: HARRINGTON, TERESA  
Address: 118 RUSTY GANS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD L COX JR

CP

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date