

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000051934

1. Entity Name
BEAVER CREEK OF PANAMA CITY, INC.



Principal Place of Business
3830 FRANKFORD AVENUE
PANAMA CITY, FL 32405

Mailing Address
3830 FRANKFORD AVENUE
PANAMA CITY, FL 32405



02202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1063364	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JUDY
3830 FRANKFORD AVENUE
PANAMA CITY, FL 32405

**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 _____

**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**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DAVIS, GROVER W
STREET ADDRESS	3024 KINGS HARBOUR RD
CITY-ST-ZIP	PANAMA CITY, FL 32405

TITLE	SD
NAME	DAVIS, JUDY D
STREET ADDRESS	3024 KINGS HARBOUR RD
CITY-ST-ZIP	PANAMA CITY, FL 32405

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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

Judy D Davis
Judy D Davis

Date

3/24/08

Daytime Phone #

850-769-1459