

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90191 036 ***150.00

DOCUMENT # P96000019376

1. Entity Name

LIBERTY UNIVERSITY MANAGEMENT, INC.



Principal Place of Business

**8600 HIGHWAY 98 WEST
PENSACOLA FL 32506**

Mailing Address

**P O BOX 3110
ORANGE BEACH AL 36561
US**

2. Principal Place of Business

24847 Commercial Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orange Beach, AL

City & State

Zip

36561

Country

Baldwin

Country

4. FEI Number

59-3362139

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MAYES, ROBERT G SR.
8600 HIGHWAY 98 WEST
PENSACOLA FL 32506**

7. Name and Address of New Registered Agent

Name **M. Ray Curtis**

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

2046 Hesperia Way

City

Pensacola

FL

Zip Code

32505

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

M. Ray Curtis

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, 2003 Fee will be \$550.00

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 **PD** ☐ Delete
NAME **MAYES, ROBERT G SR.**
STREET ADDRESS **31086 RIVER ROAD**
CITY-ST-ZIP **ORANGE BEACH AL 36561**

TITLE **VD** ☐ Delete
NAME **CURTIS, M R**
STREET ADDRESS **2046 HESPERIA WAY**
CITY-ST-ZIP **PENSACOLA FL 32505**

TITLE **SD** ☐ Delete
NAME **COOLEY, THOMAS E**
STREET ADDRESS **31158 OAK AVENUE**
CITY-ST-ZIP **ORANGE BEACH AL 36561**

TITLE **TD** ☐ Delete
NAME **MAYES, ROBERT G JR.**
STREET ADDRESS **31258 OAK AVENUE**
CITY-ST-ZIP **ORANGE BEACH AL 36561**

TITLE **D** ☐ Delete
NAME **MAYES, MINNIE L**
STREET ADDRESS **31086 RIVER ROAD**
CITY-ST-ZIP **ORANGE BEACH AL 36561**

TITLE **D** ☐ Delete
NAME **LIPSCOMB, BUFORD**
STREET ADDRESS **6003 CHANDELLE CIRCLE**
CITY-ST-ZIP **PENSACOLA FL 32507**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/03

Date

251-981-3771

Daytime Phone #

CR2E034 (10/02)