

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 26, 2005 8:00 am**  
**Secretary of State**

01-26-2005 90015 049 \*\*\*150.00

**DOCUMENT # P97000034684**

1. Entity Name

PIER 99 BEACH FRONT MOTEL, INC.



Principal Place of Business

131 GRAND HERON DR  
PANAMA CITY BEACH FL 32407

Mailing Address

131 GRAND HERON DR  
PANAMA CITY BEACH FL 32407

2. Principal Place of Business

131 Grand Heron Dr.

Suite, Apt. #, etc.

3. Mailing Address

131 Grand Heron Dr.

Suite, Apt. #, etc.

City & State

Panama City Beach

Zip  
32407

Country

BAY

City & State

Panama City Beach

Zip  
32407

Country

BAY

4. FEI Number

59-3446018

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

1st MOORE

CR2E034 (10/04)



6. Name and Address of Current Registered Agent

MCLAUGHLIN, SHARON A  
9900 SOUTH THOMAS DRIVE  
PANAMA CITY BEACH FL 32408

7. Name and Address of New Registered Agent

Name

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

131 Grand Heron Drive

City  
Panama City Beach

FL

Zip Code

32407

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]*

(Address change only) Sharon A. McLaughlin 1-20-05

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, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution. ☐

Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME MCLAUGHLIN, JOHN W  
STREET ADDRESS 9900 SOUTH THOMAS DRIVE  
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE D ☐ Delete  
NAME MCLAUGHLIN, SHARON A  
STREET ADDRESS 9900 SOUTH THOMAS DRIVE  
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 131 Grand Heron Dr.  
CITY-ST-ZIP Panama City Beach, FL 32407

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 131 Grand Heron Dr.  
CITY-ST-ZIP Panama City Beach, FL 32407

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

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STREET ADDRESS  
CITY-ST-ZIP

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

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]* Sharon A. McLaughlin

Date

1-20-05 850-230-3881

Daytime Phone #