

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000038814

1. Entity Name

BOOKER & MACDONALD REALTY, INC.

FILED

May 12, 2001 8:00 am
Secretary of State

05-12-2001 90052 048 ***150.00

Principal Place of Business

9722-B FRONT BEACH ROAD
PANAMA CITY BEACH FL 32408

Mailing Address

9722-B FRONT BEACH ROAD
PANAMA CITY BEACH FL 32408

2. Principal Place of Business

8317 Front Beach

Suite, Apt. #, etc.

#29A1

3. Mailing Address

8317 Front Beach

Suite, Apt. #, etc.

#29A1

City & State

Panama City Beach, FL

City & State

Panama City Beach, FL

Zip

32407

Country

USA

Zip

32407

Country

USA

6. Name and Address of Current Registered Agent

BOOKER, TERRY W

1825 WATKINS AVE

PANAMA CITY BEACH FL 32407

7. Name and Address of New Registered Agent

Name

BOOKER, TERRY W

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

325 Eagle Dr

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME BOOKER, CARMON J
STREET ADDRESS 1825 WATKINS AVE
CITY-ST-ZIP PANAMA CITY BEACH FL 32407 ☐ Delete

TITLE VP
NAME COY, JOHN
STREET ADDRESS 9722-B FRONT BEACH ROAD
CITY-ST-ZIP PANAMA CITY BEACH FL 32407 ☐ Delete

TITLE V
NAME MARTIN, MARTI L
STREET ADDRESS 436 S. MACARTHUR AVE
CITY-ST-ZIP PANAMA CITY FL 32401 ☒ Delete

TITLE T
NAME GLENN, TONY D
STREET ADDRESS 115 NICOLE LANE
CITY-ST-ZIP CRESTVIEW FL 32539 ☐ Delete

TITLE S
NAME RADDEN, DEBORAH
STREET ADDRESS 216 S. CHARLENE DR
CITY-ST-ZIP PANAMA CITY FL 32404 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carmon J Booker, Carmon J. Booker 4-27-01 850-236-0073
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)