

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000043469

1. Entity Name  
IN-OPERATIVE MINDS, INC.

FILED  
Apr 05, 2001 8:00 am  
Secretary of State

04-05-2001 90014 033 \*\*\*150.00

Principal Place of Business  
13667 E EMERALD COAST PARKWAY  
PANAMA CITY BEACH FL 32413

Mailing Address  
149 CAIN ROAD  
PANAMA CITY, FL 32413  
US

2. Principal Place of Business

3. Mailing Address  
22340 Overlook Drive  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State  
Panama City Bch, FL

4. FEI Number 59-3446689

Applied For  
Not Applicable

Zip Country

Zip Country  
32413 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRUBBS, SCOTT C  
307 CAIN ROAD  
PANAMA CITY FL 32413

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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

*Pamela Siegle - Owner*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-18-01

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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>GRUBB, SCOTT C.<br>307 CAIN ROAD<br>PANAMA CITY FL 32413       | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ST<br>SIEGLER, PAMELA A<br>149 CAIN ROAD<br>PANAMA CITY FL 32413    | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>DAVIS, BECKY A<br>218 PELICAN WAY<br>PANAMA CITY BCH FL 32408 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <i>22340 Overlook Drive<br/>Panama City Bch, FL 32413</i> | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Change <input type="checkbox"/> 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 807, 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:

*Pamela Siegle - Owner*  
Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

3/18/01 (850) 231-0955

CR2E034 (10/00)