

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008281

Entity Name: HISTORIC INLET BEACH NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**826 N. WALTON LAKESHORE DR.
INLET BEACH, FL 32461**Current Mailing Address:**P.O. BOX 7563
PANAMA CITY BEACH, FL 32413 US**FEI Number:** 83-0668832**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KIZZIAH, PAMELA
89 POMPANO ST.
INLET BEACH, FL 32461 US*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 KIZZIAH

02/08/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ST
Name	KIZZIAH, PAMELA
Address	89 POMPANO ST.
City-State-Zip:	INLET BEACH FL 32461

Title	DIRECTOR
Name	HORNSBY, DANNY
Address	202 POMPANO ST
City-State-Zip:	INLET BEACH FL 32461

Title	PRESIDENT
Name	JAFFE, RICHARD
Address	826 N. WALTON LAKESHORE DR.
City-State-Zip:	INLET BEACH FL 32461

Title	DIRECTOR
Name	GREENE, FRANK
Address	217 WALTON ROSE LANE
City-State-Zip:	INLET BEACH FL 32461

Title	VP
Name	SMITH, CHRISTOPHER
Address	10 GRANDE POINTE CIRCLE
City-State-Zip:	INLET BEACH FL 32461

Title	DIRECTOR
Name	THAGGARD, DAVID
Address	360 WALTON ROSE LANE
City-State-Zip:	INLET BEACH FL 32461

Title	DIRECTOR
Name	AMSHOFF, BRIAN
Address	25 EAGLES LANDING
City-State-Zip:	INLET BEACH FL 32461

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA KIZZIAH**SECRETARY/TREASURER** 02/08/2020

Electronic Signature of Signing Officer/Director Detail

Date