

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001843

Entity Name: PANAMA CITY BEACH CONVENTION AND VISITORS BUREAU, INC.**FILED**
Jan 28, 2025
Secretary of State
6703809027CC**Current Principal Place of Business:**17001 PANAMA CITY BCH PKWY
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**17001 PANAMA CITY BEACH PKWY
PANAMA CITY BEACH, FL 32413 US**FEI Number: 59-3507881****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROWE, DANIEL J
17001 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32413 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title SECRETARY/TREASURER

Name PATRONIS, JOHN

Address 5551 N. LAGOON DRIVE

City-State-Zip: PANAMA CITY FL 32408

Title DIRECTOR

Name WALSINGHAM, GARY

Address 9907 FRONT BEACH ROAD

City-State-Zip: PANAMA CITY BEACH FL 32407

Title PRESIDENT

Name ROWE, DANIEL J

Address 17001 PANAMA CITY BEACH PKWY

City-State-Zip: PANAMA CITY BEACH FL 32413

Title DIRECTOR

Name JANSEN, MIKE

Address 17001 PANAMA CITY BCH PKWY

City-State-Zip: PANAMA CITY BEACH FL 32413

Title DIRECTOR

Name DIBENEDICTIS, JEFF

Address 5340 HOPETOWN LANE

City-State-Zip: PANAMA CITY FL 32408

Title CHARIMAN

Name PEASE, CLAIRE

Address 9902 S THOMAS DR

City-State-Zip: PANAMA CITY BEACH FL 32417

Title VC

Name JOHNS, REGGIE

Address 13000 HUTCHISON BOULEVARD

City-State-Zip: PANAMA CITY BEACH FL 32407

Title DIRECTOR

Name PHILLIPS, ANDY

Address 10343 EAST COUNTY HIGHWAY 30A

City-State-Zip: SEACREST FL 32413

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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: DANIEL ROWE**PRESIDENT****01/28/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JARMAN, MIKE
Address 110 S. ARNOLD ROAD
City-State-Zip: PANAMA CITY BEACH FL 32413

Title DIRECTOR
Name REGISTER, ETHAN
Address 110 S. ARNOLD ROAD
City-State-Zip: PANAMA CITY BEACH FL 32413