

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003987

Entity Name: BAY COUNTY CONSERVANCY, INC.**Current Principal Place of Business:**120 EAST 2ND PLACE
PANAMA CITY, FL 32401**Current Mailing Address:**P O BOX 1122
PANAMA CITY, FL 32402 US**FEI Number:** 59-3511295**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARBISON, CANDIS M
120 EAST 2ND PLACE
PANAMA CITY, FL 32401 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 D
Name HARBISON, CANDIS
Address 120 EAST 2ND PLACE
City-State-Zip: PANAMA CITY FL 32401

Title D
Name HOUSER, RON
Address 1845 W. 24TH COURT
City-State-Zip: PANAMA CITY FL 32405

Title D
Name PARELL, G J
Address 330 W 23RD STREET
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name DUSSEAU, BRIAN
Address 624 BEACHCOMBER DR.
City-State-Zip: LYNN HAVEN FL 32444

Title D
Name KOLK, JACALYN N ESQ
Address P O BOX 59462
City-State-Zip: PANAMA CITY BEACH FL 32412

Title D
Name WILSON, TED
Address 2915 ISLAND VIEW ROAD
City-State-Zip: PANAMA CITY FL 32405

Title D
Name PARELL, CAROLYN
Address 402 BUNKERS COVE ROAD
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name BENTE, JOHN
Address 179 SHERRETT BRANCH ROAD
City-State-Zip: PANAMA CITY FL 32409

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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: CANDIS HARBISON**PRESIDENT****01/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BLUE, BONNIE
Address 3001 W. 10TH PLACE
206
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name CARRIE, FIORAMONTI
Address 603 EAST 2ND PLACE
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name TUBRIDY, LISA AUDUBON
Address 225 S. COVE TERRACE DRIVE
City-State-Zip: PANAMA CITY FL 32401