

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001854

FILED
Feb 10, 2017
Secretary of State
CC1535025867

Entity Name: MEXICO BEACH ARTIFICIAL REEF ASSOCIATION, INC.

Current Principal Place of Business:

MEXICO BEACH ARTIFICIAL REEF ASSOC, INC
390 HIGHWAY 98
MEXICO BEACH, FL 32410

Current Mailing Address:

MEXICO BEACH ARTIFICIAL REEF ASSOC, INC
PO BOX 13006
MEXICO BEACH, FL 32410

FEI Number: 59-3447258

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COX, CAROL D
[REDACTED]

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 PRES
Name COX, ROBERT L
[REDACTED]
[REDACTED]

Title VP
Name STUDDILL, CLAY
[REDACTED]
[REDACTED]

Title TREA
Name COX, CAROL
[REDACTED]
[REDACTED]

Title DIR
Name CHILDS, RON
[REDACTED]
[REDACTED]

Title SEC
Name STEPHENS, MARIE WADE
[REDACTED]
[REDACTED]

Title DIR
Name BLACKBURN, CHIP
[REDACTED]
[REDACTED]

Title DIR
Name JOHN, LEE A
[REDACTED]
[REDACTED]

Title DIRECTOR
Name FRANK, NOLIN
[REDACTED]
[REDACTED]

Continues on page 2

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: CAROL D COX

TREASURER

02/10/2017

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR

Name NATE, ODUM

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