
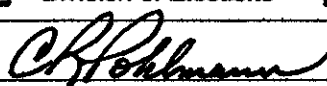


REGISTERED AGENT STATEMENT OF APPOINTMENT (Section 106.022, F.S.) (Please Type)		OFFICE USE ONLY 07 AUG 20 AM 11:10 SECRETARY OF STATE 45518	
<input type="checkbox"/> Original Appointment <input type="checkbox"/> Change of Appointment			
Registered Agent and Office Information			
Name Chuck Pohlmann		Telephone 850-939-7134	
Street Address 2956 PGA Blvd.			
City Navarre	State FL	Zip Code 32566	
Mailing Address PO Box 6212			
City Navarre	State FL	Zip Code 32566	
I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the Division of Elections.			
 Signature of Registered Agent		14 Aug 07 Date	
Former Registered Agent and Office Information (for changes only)			
Name		Telephone	
Street Address			
City	State	Zip Code	
Committee or Organization Information			
Name of Committee or Organization Navarre Pohlmann Pass Committee			
Street Address PO Box 6212		Telephone 850-939-7134	
City Navarre	State FL	Zip Code 32566	
Committee or organization is registered with:			
<input type="checkbox"/> Division of Elections <input checked="" type="checkbox"/> County Santa Rosa <input type="checkbox"/> City _____			
 Signature of Chairperson			
Charles Pohlmann		14 August 2007	
Print Name of Chairperson		Date	