

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90105 015 ****61.25

0060205

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 719003					
1. Corporation Name BOYS & GIRLS CLUBS OF ESCAMBIA COUNTY, INC.					
Principal Place of Business 2751 NORTH "H" STREET PENSACOLA FL 32591			Mailing Address PO BOX 13 PENSACOLA FL 32591		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/18/1970	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1390241	
24 Country		29 Country		30 Country	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Election Campaign Financing ☐				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JULIAN, JOHN J. 2751 NORTH "H" ST. PENSACOLA FL 32591				81 Name Hattie Grace-McCorvey			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE PPD ☒ DELETE NAME TRIMBLE, ALFRED STREET ADDRESS 4112 CROYDAN RD CITY-ST-ZIP PENSACOLA FL 32514				1.1 TITLE PPD ☒ Change ☐ Addition 1.2 NAME Freeman, William 1.3 STREET ADDRESS 3400 West Maxwell Street 1.4 CITY-ST-ZIP Pensacola, FL 32501			
TITLE PD ☒ DELETE NAME FREEMAN, W M STREET ADDRESS 3400 W MAXWELL CITY-ST-ZIP PENSACOLA FL 32514				2.1 TITLE PD ☒ Change ☐ Addition 2.2 NAME Wingage, Alvin 2.3 STREET ADDRESS 10901 Gulf Beach Hwy. 2.4 CITY-ST-ZIP Pensacola, FL 32507			
TITLE VP ☒ DELETE NAME FREEMAN, WILLIAM STREET ADDRESS 3400 W MAXWELL ST CITY-ST-ZIP PENSACOLA FL				3.1 TITLE VPD ☒ Change ☐ Addition 3.2 NAME Anderson, Thomas W. Jr. 3.3 STREET ADDRESS 5514 North Davis Hwy. #101 3.4 CITY-ST-ZIP 32503			
TITLE TD ☒ DELETE NAME WINGATE, ALVIN STREET ADDRESS 1091 GULF BCH HWY CITY-ST-ZIP PENSACOLA FL 32507				4.1 TITLE TD ☒ Change ☐ Addition 4.2 NAME McLamb, Billy 4.3 STREET ADDRESS 3800 D-Ward Blvd. 4.4 CITY-ST-ZIP 32505			
TITLE VP ☒ DELETE NAME ANDERSON, THOMAS W JR STREET ADDRESS 5514 N DAVIS HIGHWAY, SUITE 101 CITY-ST-ZIP PENSACOLA FL				5.1 TITLE VPD ☒ Change ☐ Addition 5.2 NAME Ellison, Roosevelt 5.3 STREET ADDRESS 1826 West Yonge Street 5.4 CITY-ST-ZIP 32501			
TITLE SD ☒ DELETE NAME JACKSON, SARAH STREET ADDRESS 5765 LEESWAY BLVD CITY-ST-ZIP PENSACOLA FL				6.1 TITLE SD ☒ Change ☐ Addition 6.2 NAME Kyser, Michelle 6.3 STREET ADDRESS 5600 Hilltop Road 6.4 CITY-ST-ZIP 32504			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)