## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Serigra B.-Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 7285

(8)

GIRLS INCORPORATED OF BAY COUNTY

25

NIESCHWIETZ, DONNA K -

1100 FOUNTAIN AVENUE PANAMA CITY FL 32401

Principal Place of Business

2. Principal Place of Business

Mailing Address

1100 FOUNTAIN AVENUE PANAMA CITY FL 32401

Suite, Apt. #, etc.

City & State

23 Zip

24

1100 FOUNTAIN AVENUE PANAMA CITY FL 32401-1834

2a. Maiting Address

Cily & State

Zip

Suite, Apt. #, etc.

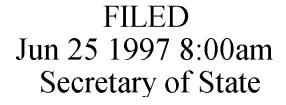
26

27

28

29

9. Name and Address of Current Registered Agent



	Date Incorporated or Qualified     12/31/1973	3a. Date of Last Report 05/01/1996					
	4. FEI Number	Applied For					
	23-7393003	Not Applicab					
	5. Certificate of Status Desired	S8.75 Additional Fee Required					
	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees					
	8. This corporation has liability for in Florida Statutes	stangible tax under s. 199.032, Yes No					
	10. Name and Address of New Reg	istered Agent					
Name							
Street Addres	ss (P.O. Box Number is Not Acceptable	e)					

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.

City

Country

30

SIGNATURE						
	Signature, typed or printed name of registered agent and title if applica	ble. (NOTE: R		e regulred when reinstaling) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P/D	DELETE	1.1 TITLE <b>D</b>	CORRESPONDING SECRETARY	Change	Addition
NAME	SAN JUAN, CAROLINE		1.2 NAME	BELT, MARI 3728 SHOREUNE CIRCLE		
STREET ADDRESS	449 W. 23RD STREET		1.3 STREET ADDRESS	3728 SHORELINE CIRCLE		
CITY-ST-ZIP	PANAMA CITY FL		1.4 CITY-ST-ZIP	PANAMA CITY, FL 32405		
TITLE <b>(</b>	V/D	DELETE	2.1 TITLE D	RECORDING SECRETARY	Change	Addition
NAME	Shoemaker, kim		2.2 NAME	GOOLSBY, MERRILL		
STREET ADDRESS	4342 BROOK FOREST DR.		23 STREET ADDRESS	ISAID THOMAS DRIVE		İ
CITY-ST-ZIP	PANAMA CITY FL 32404		2 4 CITY-ST-ZIP	PANAMA CITY BEACH, FL 324		
TITLE 2	T/D	☐ DELETE	31 TITLE D	PAST PRESIDENT	Change	Addition
NAME	BOWERS, KEITH		3.2 NAME	MILLS, ANN BROWELL 491 PALDRIMO ROAD		
STREET ADDRESS	449 W 23RD STREET		3.3 STREET ADDRESS	1499 PALDRIMO KOAD		
CITY-ST-ZIP	PANAMA CITY FL		3.4. CITY-ST-ZIP	PANAMA CITY, FZ 32405		
TITLE	CSD	DELETE	4.1 TITLE		Change	Addition
NAME	FLAX-HYMAN, CHERYL		4. 2 NAME			
STREET ADDRESS	5230 W BUSINESS 98		4 3 STREET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL		4.4 CITY - ST - ZIP			
TITLE	D	DELETE	5.1 TITLE D	PREG.	Change	Addition
NAME	CAMERON, MARY		52 NAME	CAMERON, MARY		
STREET ADDRESS	2113 COUNTRY CLUB DR.		5.3 STREET ADDRESS	12113 COUNTRY CLUB DR.		
CITY-ST-ZIP	LYNN HAVEN FL	4	5.4 CITY- ST - ZIP	CAMERON, MARY 3113 COUNTRY CLUB DR. LYNN HAVEN FZ 32444		
TITLE	D	DELETE	6.1 TITLE		Change	Addilion
NAME	MIDDLEMAS, KENDALL		6.2 NAME			
STREET ADDRESS	718 BUNKERS COVE ROAD		6.3 STREET ADDRESS			

14. I do 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 changes, or on an attachment with an address.

CR2E037 (9/96)

Zip Code