

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748320

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: WEEKLEY BAYOU IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

1022 MEADSON CIR.  
PENSACOLA, FL 32506

**New Principal Place of Business:**

**Current Mailing Address:**

1022 MEADSON CIR.  
PENSACOLA, FL 32506

**New Mailing Address:**

FEI Number: 59-2757527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAWLS, DONALD D  
12410 AIRBLANC DR  
PENSACOLA, FL 32506 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MEAD, JAMES  
Address: 1022 MEADSON CIR.  
City-St-Zip: PENSACOLA, FL 32506

Title: V ( ) Delete  
Name: GIBBS, MIKE  
Address: 1066 MEADSON CIR  
City-St-Zip: PENSACOLA, FL 32506

Title: T ( ) Delete  
Name: HUELSBECK, HARRY  
Address: 12535 OPHELIA DR  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: BOYD, BILL  
Address: 12545 MEADSON RD  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: WORKMAN, EDDIE  
Address: 12540 MEADSON RD  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: RAWLS, DON  
Address: 12410 AIRBLANC DR  
City-St-Zip: PENSACOLA, FL 32506

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARRY HUELSBECK

T

04/28/2005

Electronic Signature of Signing Officer or Director

Date