

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755255

FILED  
May 12, 2008  
Secretary of State

Entity Name: FAVORHOUSE OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2001 W BLOUNT ST  
PENSACOLA, FL 32501 US

**New Principal Place of Business:**

**Current Mailing Address:**

2001 W BLOUNT ST  
PENSACOLA, FL 32501 US

**New Mailing Address:**

FEI Number: 59-2075120      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

EMERSON, EVON  
117 W. GARDEN ST.  
PENSACOLA, FL 32502 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: SD ( ) Delete  
Name: WIMBERLY, CLARA  
Address: 3960 RAINTREE DR  
City-St-Zip: PENSACOLA, FL 32503

Title: TD ( ) Delete  
Name: WOOLF, KENNETH  
Address: 100 W. GADSDEN ST.  
City-St-Zip: PENSACOLA, FL 32501

Title: PD ( ) Delete  
Name: EMERSON, EVON  
Address: 117 W. GARDEN ST.  
City-St-Zip: PENSACOLA, FL 32502

Title: VPD ( ) Delete  
Name: GRAY, LINDA  
Address: 619 BAYSHORE DR.  
City-St-Zip: PENSACOLA, FL 32507

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

Title: SD (X) Change ( ) Addition  
Name: TATUM, KIMBERLY  
Address: 11000 UNIVERSITY PKWY. BLDG 85  
City-St-Zip: PENSACOLA, FL 32514

Title: TD (X) Change ( ) Addition  
Name: WOOLF, SUSAN  
Address: 226 S. PALAFOX PL 9TH FLOOR  
City-St-Zip: PENSACOLA, FL 32502

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 exemption stated in Chapter 119, 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: EVON EMERSON

PD

05/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date