## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 755255** 

City-St-Zip:

Entity Name: FAVORHOUSE OF NORTHWEST FLORIDA, INC.

Apr 22, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2001 W BLOUNT ST PENSACOLA, FL 32501 US **Current Mailing Address: New Mailing Address:** 2001 W BLOUNT ST PENSACOLA, FL 32501 US FEI Number: 59-2075120 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOULTON, ANN NEWLAND, NANCY CHIEF 4110 STRINGFIELD RD. 1000 COLLEGE BLVD PENSACOLA, FL 32503 PENSACOLA, FL 32504 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: CHIEF NANCY NEWLAND 04/22/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete YEAKLE, DOT JANE Name: Name: 4125 MENENDEZ DR Address: Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: Title: () Delete Title: () Change () Addition WOOLF, KENNETH Name: Name: Address: 100 W GADSDEN ST Address: City-St-Zip: PENSACOLA, FL City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MOULTON, ANN Name: NEWLAND, NANCY CHIEF Name: 1000 COLLEGE BLVD Address: 4110 STRINGFIELD RD Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32504 Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: NEWLAND, NANCY CHIEF Name: GRAY, LINDA Address: 1000 COLLEGE BLVD. Address: 619 BAYSHORE DR. PENSACOLA, FL 32504 PENSACOLA, FL 32507

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.

City-St-Zip:

SIGNATURE: CHIEF NANCY NEWLAND PD 04/22/2003