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Feb 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 764834 (8)
 1. Corporation Name
PANHANDLE CRIME STOPPERS, INC.



Principal Place of Business P.O. BOX 1776 PANAMA CITY FL 32402-1776		Mailing Address P.O. BOX 1776 PANAMA CITY FL 32402-1776	
2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 09/07/1982	4. FEI Number 59-2235879
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
City & State 23	City & State 28	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Zip 24	Country 25	Zip 29	Country 30

9. Name and Address of Current Registered Agent

NEWMAN, JOHN E
1336 FLORIDA AVE.
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81 Name	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GULKIS, NORM	1.2 NAME	TD RICHARD A. MCKINNEY
STREET ADDRESS	P.O. BOX 15932 N/A	1.3 STREET ADDRESS	1000 W. 11TH ST
CITY-ST-ZIP	PANAMA CITY FL	1.4 CITY-ST-ZIP	PANAMA CITY, FLORIDA 32402
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LEE, R.E.	2.2 NAME	SD CONNIE ROSE
STREET ADDRESS	17642 FRONT BCH ROAD #E7	2.3 STREET ADDRESS	3704 Pembroke Dr.
CITY-ST-ZIP	PANAMA CITY BCH FL	2.4 CITY-ST-ZIP	Panama City, Fla 32405
TITLE	PD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENDRICKS, BRENDA	3.2 NAME	CASSIDY, THOMAS J.
STREET ADDRESS	P O BOX 10745 N/A	3.3 STREET ADDRESS	304 MAGNOLIA AVE
CITY-ST-ZIP	PARKER FL	3.4 CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEWMAN, JOHN	4.2 NAME	D NORM GULKIS
STREET ADDRESS	1336 FLORIDA AVE	4.3 STREET ADDRESS	PO BOX 15932 N/A
CITY-ST-ZIP	PANAMA CITY FL	4.4 CITY-ST-ZIP	PANAMA CITY, FL
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABBOTT, CHARLES	5.2 NAME	
STREET ADDRESS	707 E. 5TH ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LYNN HAVEN FL 32444	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGAN, JOHN P	6.2 NAME	PD HAGAN, JOHN P
STREET ADDRESS	219 COLLINFURST SQ	6.3 STREET ADDRESS	219 COLLINFURST SQ
CITY-ST-ZIP	PANAMA CITY FL	6.4 CITY-ST-ZIP	PANAMA CITY FL 32404

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.

SIGNATURE: John P Hagan John P Hagan **02/09/98 (850)283-3134**

CP2E037 (10/97)