2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 764834 Dec 09, 2009
Secretary of State

Entity Name: PANHANDLE CRIME STOPPERS, INC.

Current Principal Place of Business: New Principal Place of Business:

5600 NEHI ROAD 5700 STAR LANE

PANAMA CITY, FL 32404 17 PANAMA CITY, FL 32404 17

Current Mailing Address: New Mailing Address:

P.O. BOX 1776

PANAMA CITY, FL 32402 17

FEI Number: 59-2235879 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:

NEWMAN, JOHN E NEWMAN, JOHN E 1336 FLORIDA AVE. STOR STAR LANE

PANAMA CITY, FL 32401 US PANAMA CITY, FL 32404 US

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: JOHN E. NEWMAN 12/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

Title: VPD () Delete Title: PD (X) Change () Addition

 Name:
 NEWMAN, JOHN
 Name:
 HUDSON, WILLIAM G

 Address:
 1336 FLORIDA AVE
 Address:
 5700 STAR LANE

 City-St-Zip:
 PANAMA CITY, FL 32401
 City-St-Zip:
 PANAMA CITY, FL 32404

Title: TD () Delete Title: VPD (X) Change () Addition Name: TINNEY, JOHN R Name: TINNEY, JOHN R

Address: 3 SEWANEE CIR. Address: 5700 STAR LANE
City-St-Zip: PANAMA CITY, FL 32405 City-St-Zip: PANAMA CITY, FL 32404

Title: PD () Delete Title: TD (X) Change () Addition

 Name:
 GULKIS, NORM
 Name:
 WAHLBERG, RANDY

 Address:
 9822 PRETTY BAYOU ISLAND DR
 Address:
 5700 STAR LANE

 City-St-Zip:
 PANAMA CITY, FL 32406
 City-St-Zip:
 PANAMA CITY, FL 32404

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 GULKIS, NORM

 Address:
 5700 STAR LANE

 City-St-Zip:
 City-St-Zip:
 PANAMA CITY, FL 32404

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: JOHN E. NEWMAN RA 12/09/2009