

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-06-2006 90023 026 ****61.25

DOCUMENT # N05000011198

1. Entity Name

BAY COUNTY VETERANS COUNCIL, INC.



Principal Place of Business

Mailing Address

% GORDON MERKEL
 918 PLANTATION DR
 PANAMA CITY FL 32404

% GORDON MERKEL
 918 PLANTATION DR
 PANAMA CITY FL 32404



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE CR2E037 (10/05)

4. FEI Number

20-3228333

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MERKEL, GORDON
 918 PLANTATION DRIVE
 PANAMA CITY FL 32404**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title of associate

(NOTE: Registered Agent signature required when removing)

DATE

**FILE NOW: FEE IS \$61.25
 Due By May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete
 NAME **BATES, NELI**
 STREET ADDRESS **246 HUGH THOMAS DRIVE**
 CITY-ST-ZIP **CALLAWAY FL 32404**

TITLE **P** Change Addition
 NAME **Thompson, Bob**
 STREET ADDRESS **715 Maxwell Court**
 CITY-ST-ZIP **Panama City, FL, 32404**

TITLE **VP** Delete
 NAME **THOMPSON, BOB**
 STREET ADDRESS **715 MAXWELL COURT**
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE **VP** Change Addition
 NAME **Sewell, Billy**
 STREET ADDRESS **5006 Cherry St.**
 CITY-ST-ZIP **Panama City, FL 32404**

TITLE **T** Delete
 NAME **MERKEL, GORDON**
 STREET ADDRESS **918 PLANTATION DRIVE**
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** Delete
 NAME **HAMMOND, RALPH**
 STREET ADDRESS **922 BOB LITTLE ROAD**
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SAA** Delete
 NAME **STEINZOR, NORM**
 STREET ADDRESS **117 ARLINGTON DRIVE**
 CITY-ST-ZIP **PANAMA CITY FL 32404**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Gordon B. Merkel

April 13, 2006 (850-871-6349)

SIGNATURE: *Gordon B. Merkel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #