## 2008 FOR PROFIT CORPORATION

## Apr 24, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P00000046229** 04-24-2008 90121 028 \*\*\*150.00 1. Entity Name CHB OF NORTHWEST FLORIDA, INC. Principal Place of Business Mailing Address 4400 BAYOU BLVD #4A 4400 BAYOU BLVD STE 4A PENSACOLA, FL 32503 PENSACOLA, FL 32503 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 04222008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3645712 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MOORHEAD, STEPHEN R Street Address (P.O. Box Number is Not Acceptable) 25 WEST GOVERMENT ST PENSACOLA, FL 32502 City 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, bacetion of most some of registered against the Table case. «Подоля ракоторя и адмите од пофила на мяжную -011 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D Delete IIILE Change ■ Addition ROGERS, MILTON C NAME I ÀLE STREET ADDRESS P.O. BOX 2172 N/A STREET ADDRESS CITY ST ZIP PENSACOLA, FL 32513 CITY ST 7P TITLE ☐ Delete TITLE Change noifibbA 🔲 PORTER, MARK E NAME LAME STREET AUGRESS 3694 SCENIC HWAY STREET ADDRESS CITY ST 200 PENSACOLA, FL 32514 CITY ST ZIP TITLE ☐ Detete ☐ Change ☐ Addition LAME. LADNER, IRENE.F. 1.AME STREET ADDRESS 7634 BROOK FOREST DRIVE STREET ADDRESS CITY ST-ZIP PENSACOLA, FL 32514 CITY ST ZIP TITLE Detete TITLE ☐ Change ■ Addition 1.AMF HOLCOMB, JEFFREY S I.AME STREET ADDRESS 1002 E TEN MILE RD STREET ALLORESS CITY-ST-ZIP PENSACOLA, FL 32514 CITY ST ZIP TITLE ☐ Delete MILE ☐ Change Addition Thomas, Chenyl 4400 Bayou Blud Ste4A LAME NAME STREET ADDRESS STREET ALLERESS CITY ST ZIP CHY SE 7P Pensacola Fr TITLE Delete nne ☐ Change ☐ Addition LAME LALGE STREET ADDRESS STREET AUGRESS

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 607, 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.

CITY ST ZIP

SIGNATURE:

CITY ST ZIP

Momas SIGNATURE AND TYPED OR PRINTED NAME OF SIGHING OFFICER OR DIRECTOR

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