

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33500

**FILED**  
**Feb 01, 2017**  
**Secretary of State**  
**CC3333919480**

**Entity Name:** THE WEST FLORIDA BAPTIST INSTITUTE, INC.

**Current Principal Place of Business:**

6812 LILLIAN HIGHWAY  
PENSACOLA, FL 32506

**Current Mailing Address:**

6812 LILLIAN HIGHWAY  
PENSACOLA, FL 32506

**FEI Number:** 59-2965823

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SWAN, JOHN  
4204 SHENADOAH PL  
MILTON, FL 32583 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 SWAN

02/01/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MERRITT, STEVE  
Address 8350 BEECHWOOD DR  
City-State-Zip: GRAND BAY AL 36541

Title DIRECTOR  
Name ADAM, CHRIS  
Address 4760 EMERALD DR.W.  
City-State-Zip: THEODORE AL 36582

Title DIRECTOR  
Name SAXON, DICK  
Address 260 FIRETOWER RD. W.  
City-State-Zip: THEODORE, AL 36582

Title DIRECTOR  
Name ARNOLD, HENRY L  
Address 4551 TERRASANTA  
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR  
Name SWAN, JOHN  
Address 4204 SHENANDOAH PL.  
City-State-Zip: MILTON FL 32583

Title DIRECTOR  
Name BALLARD, JAMES  
Address 6400 BITTERNUT  
City-State-Zip: MILTON FL 32583

Title DIRECTOR  
Name GONNELLA, DAVID  
Address 6008 THEODORE DAWES RD.  
City-State-Zip: THEODORE AL 36582

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOHN SWAN

**DIRECTOR**

02/01/2017

Electronic Signature of Signing Officer/Director Detail

Date