

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41448

Entity Name: ESCAMBIA COUNTY 4-H FOUNDATION, INC.**Current Principal Place of Business:**3740 STEFANI RD
CANTONMENT, FL 32533**Current Mailing Address:**3740 STEFANI RD
CANTONMENT, FL 32533 US**FEI Number:** 59-3041362**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLEN, PAMELA H
3740 STEFANI ROAD
CANTONMENT, FL 32533 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	BELL, BRIAN
Address	33 W. GARDEN STREET
City-State-Zip:	PENSACOLA FL 32502

Title	VP
Name	VIDAK, JOE
Address	8025 ABRAMOVICH LANE
City-State-Zip:	MOLINO FL 32577

Title	D
Name	ALLEN, PAM
Address	505 BOXWOOD LANE
City-State-Zip:	GULF BREEZE FL 32561

Title	SEC
Name	GLEATON, ERIC
Address	102 E. NINE MILE ROAD
City-State-Zip:	PENSACOLA FL 32534

Title	T
Name	CROSBY, GWEN
Address	2891 MAGNOLIA AVENUE
City-State-Zip:	PENSACOLA FL 32503

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: PAMELA H. ALLEN

CED

02/07/2013

Electronic Signature of Signing Officer/Director Detail_____
Date