

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47647

Entity Name: BAY, FRANKLIN, GULF HEALTHY START COALITION, INC.

Current Principal Place of Business:

907 CHERRY STREET
PANAMA CITY, FL 32401

Current Mailing Address:

907 CHERRY STREET
PANAMA CITY, FL 32401 US

FEI Number: 59-3158212

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARON, OWENS M
907 CHERRY STREET
PANAMA CITY, FL 32401 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: SHARON M OWENS

01/26/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MONIZ, DION
Address 304 MAGNOLIA AVENUE
City-State-Zip: PANAMA CITY FL 32401

Title TREASURER
Name CATHEY, BRIAN
Address 103 NORTH 30TH STREET
City-State-Zip: MEXICO BEACH FL 32410

Title SECRETARY
Name CARLSON, BRANDY
Address 1130 N. BAY DRIVE
City-State-Zip: LYNN HAVEN FL 32444

Title VP
Name MOORE, ELIZABETH
Address 203 ABERDEEN PKWY
City-State-Zip: PANAMA CITY FL 32401

Title PRESIDENT
Name BODINE, KIM
Address 5230 WEST HIGHWAY 98
City-State-Zip: PANAMA CITY FL 32401

Title CEO
Name OWENS, SHARON M
Address 228 SOUTH CLAIRE DRIVE
City-State-Zip: PANAMA CITY FL 32401

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: SHARON OWENS

EXECUTIVE DIRECTOR

01/26/2015

Electronic Signature of Signing Officer/Director Detail

Date