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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. AS

# SIGNATURE: MARY MATHEWS

STE. 320

City-State-Zip:

PENSACOLA FL 32501

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# H27504

Entity Name: PENSACOLA POB INCORPORATED

## **Current Principal Place of Business:**

1717 NORTH E ST SUITE 320 PENSACOLA, FL 32501

#### **Current Mailing Address:**

**1717 NORTH E STREET** SUITE 320, ATTN. MARY MATHEWS PENSACOLA, FL 32501 US

### FEI Number: 59-2462399

### Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH 1717 NORTH E ST STE 320 PENSACOLA, FL 32501 US

Title Р Name PORTER, JOHN 1717 NORTH E ST STE 320 Address City-State-Zip: PENSACOLA FL 32501 Title Т MCGEE, ELEANOR Name Address 1717 NORTH E ST STE 321 City-State-Zip: PENSACOLA FL 32501 Title SECRETARY Name GORAUM, TRINA Address 1717 NORTH E ST.

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

## **Officer/Director Detail :**

Title	ASST. SECRETARY	
Name	MATHEWS, MARY	
Address	1717 NORTH E ST	STE 320
City-State-Zip:	PENSACOLA FL 32	501
Title	VP	
Name	VIOLA, MIKE	
Address	1717 NORTH E ST., 5	STE. 320
	1717 NORTH E ST., S PENSACOLA FL 32	
	Name Address City-State-Zip: Fitle	Name MATHEWS, MARY Address 1717 NORTH E ST City-State-Zip: PENSACOLA FL 325

04/24/2014

Date

FILED Apr 24, 2014 Secretary of State CC1201893551

Certificate of Status Desired: No

Date