

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046229

Entity Name: CHB OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

4400 BAYOU BLVD., STE. 46
PENSACOLA, FL 32503

Current Mailing Address:

4400 BAYOU BLVD STE 46
PENSACOLA, FL 32503

FEI Number: 59-3645712

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOORHEAD, STEPHEN R
25 WEST GOVERNMENT ST
PENSACOLA, FL 32502 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 VP
Name ROGERS, MILTON C
Address P.O. BOX 2172
City-State-Zip: PENSACOLA FL 32513

Title P
Name PORTER, MARK E
Address 5924 DAHOON DRIVE
City-State-Zip: PENSACOLA FL 32526

Title VP
Name MORRIS, DAVID H
Address 4168 N CAMBRIDGE WAY
City-State-Zip: PACE FL 32571

Title VP.
Name CINICOLA, DONNA
Address 3588 WIMBLEDON DR.
City-State-Zip: PENSACOLA FL 32502

Title VP.
Name WARD, KEVIN
Address 6009 DAHOON DR.
City-State-Zip: PENSACOLA FL 32526

Title VP.
Name GODFREY, JEFF
Address 4771 BAYOU BLVD
#322
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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONNA CINICOLA

VP

02/05/2013

Electronic Signature of Signing Officer/Director Detail

Date