

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702718

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** ESCAMBIA SEARCH AND RESCUE, INC.

**Current Principal Place of Business:**

9530 NIMS LANE  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

9530 NIMS LANE  
PENSACOLA, FL 32534

**New Mailing Address:**

**FEI Number:** 59-1813182

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOLLENS, ALFRED A  
3720 BARKWOOD LANE  
CANTONMENT, FL 32533 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: BOLLENS, ALFRED A  
Address: 3720 BARKWOOD LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: D  
Name: POLSTON, CLAUDIA  
Address: 2021 CORAL STREET  
City-St-Zip: PENSACOLA, FL 32506

Title: D  
Name: POLSTON, BILL  
Address: 2021 CORAL ST  
City-St-Zip: PENSACOLA, FL 32506

Title: SEC.  
Name: RHODES, JON  
Address: 705 SOUTHERN COURT  
City-St-Zip: GULF BREEZE, FL 32561

Title: TRES  
Name: PROVO, DANA  
Address: 1555 OCEAN BREEZE LANE  
City-St-Zip: GULF BREEZE, FL 32563

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: ALFRED A BOLLENS

DIR

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date