

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707831

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** PENSACOLA SISTER CITIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

100 NIGHTINGALE LANE  
GULF BREEZE, FL 32561 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 9131  
PENSACOLA, FL 325139131 US

**New Mailing Address:**

**FEI Number:** 59-1110437      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

LUBKOWITZ, ADELA FERNANDE  
100 NIGHTINGALE LANE  
GULF BREEZE, FL 32561 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: P  
Name: LUBKOWITZ, ADELA FERNANDE  
Address: PO BOX 178  
City-St-Zip: GULF BREEZE, FL 32562 US

Title: VPST  
Name: ASMAR, AMELIA  
Address: 4220 BONWAY DRIVE  
City-St-Zip: PENSACOLA, FL 32504

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: ADELA FERNANDEZ

P

04/09/2012

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

\_\_\_\_\_  
Date