2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 16, 2006 8:00 am Secretary of State 02-16-2006 90046 015 ****61.25

DOCUMENT #709911 THE PENSACOLA JUNIOR COLLEGE FOUNDATION, INC. Principal Place of Business Mailing Address 60017012 1000 COLLEGE BOHLEVARD 1000 COLLEGE BOULEVARD PENSACOLA, FL 32504 PENSACOLA, FL 32504 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 01232006 CR2E037 (11/05) 4. FEI Number 59-6173057 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHITTEN, PATRICE S. 1000 COLLEGE BLVD BLDG & 3 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA, FL 32504 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS TITLE ☐ Delete TITLE ☐ Change ☐ Addition OWENS, THOMAS NAME NAME STREET ADDRESS 1901 E GADSEN STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32501 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition ROBINSON, GROVER IV NAME NAME 4165 BAISDEN ROAD STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP PENSACOLA, FL 32503 CITY-ST-7IP Delete TITLE ☐ Addition TITLE Change DAVIS, CAROLYN NAME NAME STREET ADDRESS 1213 ARIOLA DRIVE STREET ADDRESS PENSACOLA BEACH, FL 32561 CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE LANTZ, DANYELLE NAME 3300 NEW HOPE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32504 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Patrice S. Whitten

SIGNATURE: /

1/31/06

(850) 484-1560

Daytime Phone #