## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 709911** 

FILED Mar 19, 2009 Secretary of State

Entity Name: THE PENSACOLA JUNIOR COLLEGE FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1000 COLLEGE BOULEVARD PENSACOLA, FL 32504

**Current Mailing Address: New Mailing Address:** 

1000 COLLEGE BOULEVARD PENSACOLA, FL 32504

FEI Number: 59-6173057 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WHITTEN, PATRICE S. WHITTEN, PATRICE S. 1000 COLLEGE BLVD BLDG 96 1000 COLLEGE BLVD BLDG 17 PENSACOLA, FL 32504 PENSACOLA, FL 32504

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: 03/19/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition CADDELL, PAM H CADDELL, PAM H Name: Name:

650 W. OAKFIELD ROAD Address: 650 W. OAKFIELD ROAD Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503

Title: () Delete Title: (X) Change ( ) Addition ROBINSON, GROVER IV ROBINSON, GROVER IV Name: Name:

Address: 2268 LAVISTA AVE Address: 2268 LAVISTA AVE City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32504

Title: () Delete Title: (X) Change ( ) Addition DAVIS, CAROLYN R STOPP, MARGARET Name: Name:

25 E WRIGHT ST STE 2510 220 W. GARDEN ST., 9TH FLOOR Address:

Address: City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32502

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: OWENS, THOMAS Name: OWENS, THOMAS Address: 1901 E GADSEN ST Address: 5061 N. 12TH AVENUE City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32504

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PATRICE S. WHITTEN ED 03/19/2009