

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90186 043 ****61.25

DOCUMENT # 711757

1. Entity Name
G.F.W.C. PENSACOLA, INC.



Principal Place of Business
**PENSACOLA JUNIOR COLLEGE
STUDENT CENTER. BLDG 5. RM 509
PENSACOLA FL
US**

Mailing Address
**POST OFFICE BOX 11703
PENSACOLA FL 32524**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **51-0175946**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEAD, LISA **Coddington, Leslie**
3700 POTOSI RD **5604 Scotland Terrace**
PENSACOLA FL 32504 **Pensacola, FL. 32526**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 Leslie Coddington Leslie Coddington, Treasurer

3/22/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **PURVIS, JUDY**
STREET ADDRESS **835 FLEMING CT**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **Judy Purvis** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **TELATOUGH, LINDA**
STREET ADDRESS **4521 CITADEL DR**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **Pat Crawford** ☒ Change ☐ Addition
NAME
STREET ADDRESS **1236 Tamara Dr.**
CITY-ST-ZIP **Pensacola, FL 32504**

TITLE **IV** ☐ Delete
NAME **RIESBERG, MARYS**
STREET ADDRESS **8211 KLONDIKE RD**
CITY-ST-ZIP **PENSACOLA FL 32526**

TITLE **Nancie Kobryn** ☒ Change ☐ Addition
NAME
STREET ADDRESS **5103 Yester Oaks PL.**
CITY-ST-ZIP **Pensacola, FL 32504**

TITLE **T** ☐ Delete
NAME **MEAD, LISA**
STREET ADDRESS **3700 POTOSI RD**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE **Leslie Coddington** ☒ Change ☐ Addition
NAME
STREET ADDRESS **5604 Scotland Terrace**
CITY-ST-ZIP **Pensacola, FL. 32526**

TITLE **2VD** ☐ Delete
NAME **KOBYRN, NANCIE**
STREET ADDRESS **5103 YESTEROAK PLACE**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE **Marry Williams** ☒ Change ☐ Addition
NAME
STREET ADDRESS **3320 Tompkins St.**
CITY-ST-ZIP **Pensacola, FL 32504**

TITLE **3VD** ☐ Delete
NAME **NALLEY, GENNI**
STREET ADDRESS **3580 RIDDICK DR**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE **Genni Nalley** ☐ Change ☐ Addition
NAME
STREET ADDRESS **3580 Riddick Dr**
CITY-ST-ZIP **Pensacola, FL 32504**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: Leslie Coddington Leslie Coddington 3/22/03 8504582845

CR2E037 (10/02)