

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719003

FILED
Apr 10, 2009
Secretary of State

Entity Name: BOYS & GIRLS CLUBS OF ESCAMBIA COUNTY, INC.

Current Principal Place of Business:

2751 NORTH H STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

PO BOX 12206
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-1390241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACE, HATTIE
2751 NORTH H STREET
PENSACOLA, FL 32501 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: PD () Delete
Name: GONTARSKI, KELLY
Address: 12126 BAHIA COURT
City-St-Zip: PENSACOLA, FL 32507

Title: VPD () Delete
Name: PRICE, BRETT
Address: 930 GERHARDT DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: VPD () Delete
Name: GIBSON, CANDACE
Address: 2205 LA VISTA AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: VPD () Delete
Name: SANDERS, ADETOUN
Address: 4912 RANDEE CIRCLE
City-St-Zip: PENSACOLA, FL 32526

Title: TD () Delete
Name: SCOTT, RODNEY
Address: 1230 NORTHBROOK DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: SD () Delete
Name: DOGAN, REGINALD
Address: 116 NORTH DONELSON ST.
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HATTIE GRACE

EXEC

04/10/2009

Electronic Signature of Signing Officer or Director

Date