

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725407

FILED
Jan 05, 2004
Secretary of State**Entity Name:** THE PANAMA CITY RESCUE MISSION, INC**Current Principal Place of Business:**609 ALLEN AVENUE
PANAMA CITY, FL 32401**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 2359
PANAMA CITY, FL 32402**New Mailing Address:****FEI Number:** 59-1580961**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHAMBERS THURMAN
2512 WEST 27TH STREET
PANAMA CITY, FL 32405 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:** TD () Delete
Name: SOWELL, DAN
Address: 2323 MOUND AVE
City-St-Zip: PANAMA CITY, FL 32405**Title:** 2VPD () Delete
Name: POST, RICHARD SR
Address: 1428 LAKE AVE.
City-St-Zip: PANAMA CITY, FL 32401**Title:** SD () Delete
Name: RICE, GEORGE LLL
Address: 1025 WEST 19TH 14B
City-St-Zip: PANAMA CITY, FL 32405**Title:** 1VPD () Delete
Name: SPEARS, JAMES B.
Address: 3019 DOUGLAS RD LOT 2
City-St-Zip: PANAMA CITY, FL 32404**Title:** BM () Delete
Name: KORNMAN, BILL
Address: 1103 WISCONSIN AVE.
City-St-Zip: LYNN HAVEN, FL 32444**Title:** PD () Delete
Name: SLONE, JAMES C JR
Address: 4740 BAYWOOD DR
City-St-Zip: LYNN HAVEN, FL 32444**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** T/S (X) Change () Addition
Name: SOWELL, DAN
Address: 2323 MOUND AVE
City-St-Zip: PANAMA CITY, FL 32405**Title:** 1VP (X) Change () Addition
Name: HAZARD, HENRY REV
Address: 3380 STATE AVE
City-St-Zip: PANAMA CITY, FL 32405**Title:** BM (X) Change () Addition
Name: DYE, RICK
Address: 1830 COUNTRY CLUB DRIVE
City-St-Zip: LYNN HAVEN, FL 32444**Title:** 2VP (X) Change () Addition
Name: SPEARS, JAMES B.
Address: 3019 DOUGLAS RD LOT 2
City-St-Zip: PANAMA CITY, FL 32404**Title:** () Change () Addition
Name:
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 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 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: HENRY HAZARD

1VP

01/05/2004

Electronic Signature of Signing Officer or Director

Date