2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 731214

Entity Name: THE ROCK OF PANAMA CITY, INC.

Current Principal Place of Business:

2413 N. HARRIS AVE.
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

2413 N. HARRIS AVE.
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-2797860 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BALL,F. NOLAN
2631 FEROL LANE
LYNN HAVEN, FL 32444 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:	D	( ) Delete
Name:	JACKSON, JOANN	
Address:	3511 BROOKE LN	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	P	( ) Delete
Name:	BALL, F. NOLAN	
Address:	2631 FEROL LANE	
City-St-Zip:	LYNN HAVEN, FL 32444	
Title:	SD	( ) Delete
Name:	PORTER, DEBRA C	
Address:	4114 CORBIN ST.	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	D	( ) Delete
Name:	TINCH, JEFFREY K	
Address:	1212 COLLEGEWOOD DR	
City-St-Zip:	LYNN HAVEN, FL 32444	

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
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: DEBRA PORTER SD 04/13/2009

Electronic Signature of Signing Officer or Director — Date