

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752983

FILED  
Jan 13, 2007  
Secretary of State

**Entity Name:** MENTAL HEALTH ASSOCIATION OF WEST FLORIDA, INC.

**Current Principal Place of Business:**

840 LAKEVIEW AVE  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

840 LAKEVIEW AVE  
PENSACOLA, FL 32501

**New Mailing Address:**

**FEI Number:** 59-0799900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTLER, KRIS R.  
6190 ARBUTUS DRIVE  
PENSACOLA, FL 32504 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: CD ( ) Delete  
Name: KUEHN, ELIZABETH  
Address: 6321 LANLEY PL RD  
City-St-Zip: PENSACOLA, FL 32504

Title: SD ( ) Delete  
Name: BODDY, BETTY  
Address: 3600 RIVERWOODS LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: VD ( ) Delete  
Name: HAMEL, DAN  
Address: 1221 W. LAKEVIEW AVE. BLDG.B BOX 44  
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete  
Name: TAYLOR, SAM  
Address: 4400 BAYOU BLVD. SUITE 8-D  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: VAN HORN, FRANKIE  
Address: 901 WILLIAMS DITCH ROAD  
City-St-Zip: CANTONMENT, FL 32533

Title: TD ( ) Delete  
Name: TAYLOR, STEPHANIE  
Address: 905 HATTON STREET  
City-St-Zip: PENSACOLA, FL 32503

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: HAMEL, DAN  
Address: 5546 ORIOLE STREET  
City-St-Zip: MILTON, FL 32570

Title: SD (X) Change ( ) Addition  
Name: SCHYMANSKI, JOY  
Address: 7244 GRIMMS LANDING  
City-St-Zip: NAVARRE, FL 32566

Title: VD (X) Change ( ) Addition  
Name: TAYLOR, SAM  
Address: 4400 BAYOU BLVD. STE. 8-D  
City-St-Zip: PENSACOLA, FL 32503

Title: VD (X) Change ( ) Addition  
Name: CRAWFORD, WILLIAM  
Address: 1017 N. PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: TD (X) Change ( ) Addition  
Name: ADAMSON, JACKIE  
Address: 1138 EAST BURGESS RD.  
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change ( ) Addition  
Name: BEARD, TONI  
Address: 524 BRIARWOOD DR.  
City-St-Zip: PENSACOLA, FL 32506

I hereby certify that the information supplied with this filing does not qualify for the 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: JOY SCHYMANSKI

SD

01/13/2007

Electronic Signature of Signing Officer or Director

Date