2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755255

FILED Apr 13, 2007 Secretary of State

Entity Name: FAVORHOUSE OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2001 W BLOUNT ST

PENSACOLA, FL 32501 US

Current Mailing Address: New Mailing Address:

2001 W BLOUNT ST

PENSACOLA, FL 32501 US

FEI Number: 59-2075120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMART, WILLIAM EMERSON, EVON 34 PORT ROYAL WAY 117 W. GARDEN ST.

PENSACOLA, FL 32502 US PENSACOLA, FL 32502 US

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: EVON EMERSON 04/13/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: SD () Delete Title: SD (X) Change () Addition

 Name:
 FITZGERALD, GLENDA
 Name:
 WIMBERLY, CLARA

 Address:
 P O BOX 355
 Address:
 3960 RAINTREE DR

 City-St-Zip:
 BAGDAD, FL 32530
 City-St-Zip:
 PENSACOLA, FL 32503

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 MOSER, DEBBIE
 Name:
 WOOLF, KENNETH

 Address:
 9630 WESSTGATE CIRCLE
 Address:
 100 W. GADSDEN ST.

 City-St-Zip:
 PENSACOLA, FL 32507
 City-St-Zip:
 PENSACOLA, FL 32501

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SMART, WILLIAM
 Name:
 EMERSON, EVON

 Address:
 34 PORT ROYAL WAY
 Address:
 117 W. GARDEN ST.

 City-St-Zip:
 PENSACOLA, FL 32502
 City-St-Zip:
 PENSACOLA, FL 32502

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 HOUGH, RICHARD
 Name:
 GRAY, LINDA

 Address:
 5982 RIDGEVIEW DR
 Address:
 619 BAYSHORE DR.

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 PENSACOLA, FL 32507

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: EVON EMERSON PD 04/13/2007