

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759146

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** THE NORTHWEST FLORIDA LAYMEN FELLOWSHIP DEPARTMENT, INC.

**Current Principal Place of Business:**

1611 EAST BAARS STREET  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

1611 EAST BAARS STREET  
PENSACOLA, FL 32503

**New Mailing Address:**

**FEI Number:** 59-2212427

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVERETT, FERBY  
7552 UNTREIMER AVENUE  
PENSACOLA, FL 32534 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: P ( ) Delete  
Name: ENGLISH, EARNEST,  
Address: 1611 EAST BAARS STREET  
City-St-Zip: PENSACOLA, FL 32503

Title: P ( ) Delete  
Name: AUGUSTINE, CALVIN,  
Address: 2941 CHARTER OAKS LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: S ( ) Delete  
Name: ROBINSON, EUGENE,  
Address: 1406 W YONGE ST  
City-St-Zip: PENSACOLA, FL

Title: T ( ) Delete  
Name: LANE, NED  
Address: 2360 SILVERSIDES LOOP  
City-St-Zip: PENSACOLA, FL 32526

**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: EARNEST ENGLISH

P

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date