

(AMENDED)
**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 AUG 21 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 761707

1. Entity Name

THE PHILIPPINE BAYANIHAN ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

713 TUXEDO DRIVE

Suite, Apt. #, etc.

City & State

FORT WALTON BEACH, FL

Zip

32547

Country

USA

3. Mailing Address

713 TUXEDO DRIVE

Suite, Apt. #, etc.

City & State

FORT WALTON BEACH, FL

Zip

32547

Country

USA

4. FEI Number

59-2171279

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

STILLWELL, PERPETUA B.

Street Address (P.O. Box Number is Not Acceptable)

713 TUXEDO DRIVE

City

FORT WALTON BEACH

FL

Zip Code

32547

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FEES \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROSE, CATALYNA
STREET ADDRESS	613 MANCHESTER RD.
CITY-STATE-ZIP	FORT WALTON BEACH, FL 32547
TITLE	VP
NAME	ERWINE, IRMA
STREET ADDRESS	P.O. BOX 9182
CITY-STATE-ZIP	HURLBURT FIELD, FLORIDA 32544
TITLE	S
NAME	BARNES, SALVACION
STREET ADDRESS	491 SANDY RIDGE CIRCLE
CITY-STATE-ZIP	MARY ESTHER, FL 32569
TITLE	TD
NAME	STILLWELL, PERPETUA B.
STREET ADDRESS	713 TUXEDO DRIVE
CITY-STATE-ZIP	FORT WALTON BEACH, FL 32547
TITLE	D
NAME	JOHNSON, SALLY
STREET ADDRESS	321 IVA PLACE, S.W.
CITY-STATE-ZIP	FORT WALTON BEACH, FL 32548
TITLE	
NAME	SEE ATTACHED LIST
STREET ADDRESS	FOR ADDITIONAL DIRECTORS
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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TITLE	
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**DO NOT WRITE
IN THIS SPACE**

CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Perpetua B. Stillwell

PERPETUA B. STILLWELL

Date

AUG 16, 02

Daytime Phone #

850-863-1376