

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761707

FILED
Mar 11, 2009
Secretary of State

Entity Name: THE PHILIPPINE BAYANIHAN ASSOCIATION, INC.

Current Principal Place of Business:

713 TUXEDO DRIVE
FT WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

713 TUXEDO DRIVE
FT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 59-2171279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSEN, ROSALINA P
321 SW IVA PLACE
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

BARNES, SALVACION P
491 SANDY RIDGE CIRCLE
MARY ESTER, FL 32569 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: SALVACION P. BARNES

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSEN, ROSALINA
Address: 321 IVA PLACE
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: VD () Delete
Name: DUNN, LUCY
Address: 5 NW RACETRACK ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DS () Delete
Name: BATTLES, ELVIRA M
Address: 2056 PRITCHARD POINT DRIVE
City-St-Zip: NAVARRE, FL 32566 US

Title: TD () Delete
Name: GRIFFETH, TESS
Address: 346 WOODROW STREET, APT. #1
City-St-Zip: FORT WALTON BEACH, FL 32547 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARNES, SALVACION P
Address: 491 SANDY RIDGE CIRCLE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: VD (X) Change () Addition
Name: ROBINSON, ESPERANZA C
Address: 117 PRYOR DRIVE
City-St-Zip: MARY ESTHER, FL 32569 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: STILLWELL, PERPETUA B
Address: 713 TUXEDO DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

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: SALVACION P. BARNES

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date