

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90310 015 ****70.00

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1. Entity Name
THE PHILIPPINE BAYANIHAN ASSOCIATION, INC.



Principal Place of Business

**713 TUXEDO DRIVE
FT WALTON BEACH FL 32547
US**

Mailing Address

**713 TUXEDO DRIVE
FT WALTON BEACH FL 32547
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2171279**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STILLWELL, PERPETUA B
713 TUXEDO DRIVE
FORT WALTON BEACH FL 32547**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **ROSE, CATALYNA**
STREET ADDRESS **613 MANCHESTER RD**
CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **ERWINE, IRMA**
STREET ADDRESS **P.O. BOX 9182**
CITY-ST-ZIP **HURLBURT FIELD FL 32544**

TITLE **V** ☒ Change ☐ Addition
NAME **HELEN LOVETT**
STREET ADDRESS **107 B. OAK DRIVE**
CITY-ST-ZIP **EGLIN AFB, FL 32542**

TITLE **S** ☐ Delete
NAME **BARNES, SALVACION**
STREET ADDRESS **491 SANDY RIDGE CIRCLE**
CITY-ST-ZIP **MARY ESTHER FL 32569**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **STILLWELL, PERPETUA B**
STREET ADDRESS **713 TUXEDO DRIVE**
CITY-ST-ZIP **FT WALTON BEACH FL 32547**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **JOHNSON, SALLY**
STREET ADDRESS **321 IVA PLACE S.W.**
CITY-ST-ZIP **FORT WALTON BEACH FL 32548**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **CARR, CRIS**
STREET ADDRESS **64 FRIENDLY LANE**
CITY-ST-ZIP **SHALIMAR FL 32579**

TITLE **D** ☒ Change ☐ Addition
NAME **LUCKY DUNN**
STREET ADDRESS **S.W. RACETRACK ROAD**
CITY-ST-ZIP **FORT WALTON BEACH, FL 32547**

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Perpetua B. Stillwell

JAN 28 2003 850-8632376

CR2E037 (10/02)