## Secretary of State MANNA FOOD BANK, INC. 05-16-2000 90004 045 \*\*\*\*70.00 Principal Place of Business Mailing Address 116 EAST GONZALEZ STREET P.O. BOX 2582 PENSACOLA FL 32501 $\mathbf{p} \in \mathcal{P} \cup \mathcal{P} \cup$ PENSACOLA FL 32513-2582 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2181031 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) EVANS, TIMOTHY H 1225 LANGLEY AVE. PENSACOLA FL 32504 City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD PD TITLE Delete TITLE √ Change Addition LEE. DOUG NAME John Kendall NAME 3030 Desert Street STREET ADDRESS 3113 E DESOTO ST STREET ADDRESS CITY-ST-ZIP PENSACOLA FL Pensacola, FL 32514 CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition ARONSON, SHERLEE NAME Georgena Sanchez NAME STREET ADDRESS 850 WOODBINE DR 5061 High Pointe Dr. STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-7IP Pensacola, FL TITLE Delete TITLE Change ☐ Addition WHITE, JOYCE NAME NAME Rhette Anderson STREET ADDRESS 178 WILDFLOWER LANE STREET ADDRESS 3985 Piedmont Rd. CITY-ST-ZIP PENSACOLA FL 32514 CITY-ST-ZIP <del>Pensacola, FL 32503</del> TITLE ☐ Delete TITLE Change Addition ΙTD EVANS, TIMOTHY H NAME NAME Denise LeGear STREET ADDRESS 1225 LANGLEY AVE. STREET ADDRESS 7200 Alden Circle CITY-ST-ZIP PENSACOLA FL CITY-ST-7IP Navarre, FL 32566 TITLE ☐ Delete TITLE - Change **★** Addition BAKER, SUSAN NAME NAME Jennifer Adkins STREET ADDRESS 5267 BERRYHILL RD STREET ADDRESS CITY-ST-ZIP MILTON FL CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME Dan Bishop STREET ADDRESS STREET ADDRESS 3713 Andrew Jackson Dr. CITY-ST-7IP Pace, FL 32571 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 Timothy H. Evans April 24, 2000 (850)432-2053 Daytime Phone #

DOCUMENT # **762724** 

May 16, 2000 8:00 am