


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # 766772 1. Entity Name ECONFINA ENVIRONMENTAL CLUB, INC.	
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Principal Place of Business 1001 HARRISON AVENUE C/O ELLIS E. FOWHAND PANAMA CITY, FL 32401	Mailing Address 1001 HARRISON AVENUE C/O ELLIS E. FOWHAND PANAMA CITY, FL 32401
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01062007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2879727	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FOWHAND, ELLIS E. 1001 HARRISON AVENUE PANAMA CITY, FL 32401

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GARNER, JAMES 501 W. 19TH ST. PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, GROVER 3024 KINGS HARBOUR ROAD PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, JAMES T. III 504 CHERRY ST PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISLER, CHARLES S. III 434 MAGNOLIA AVE. PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CAMPBELL, JAMES D. 7 WEST 23RD STREET PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000604184
01/29/07-80043-018 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or without other like empowered.

SIGNATURE: *Ellis E. Fowhand* President 1/24/07 850-785-5201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #