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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 767945

(9)

ANCHORAGE CHILDREN'S HOME OF BAY COUNTY, INC.

FILED Mar 25 1997 8:00am Secretary of State



Principal Pia	ce of Business	Mailing Address			i dibit didii dibii dibii didii didit didti iddi
707 MARTIN LUTHER KING JR BLVD		C/O WARNER, WILLIAM,	G.		
PANAMA CITY FL 32401 US 2. Principal Place of Business		475 HARRISON AVE. ST			
		PANAMA CITY FL 32401-2731 US		3. Date Incorporated or Qualified 04/13/1983	3a. Date of Last Report 04/29/1996
		2a. Mailing Address		4. FEI Number	Applied For
1		26		59-2323037	Not Applicab
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
4	25	29	30		Yes X No
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Reg	istered Agent
			81 Name		
	r, william g		82 Street Ad	ddress (P.O. Box Number is Not Acceptable	e)
	rrison ave				
SUITE 1			83		
PANAMA CITY FL 32401			84 City		85 Zip Code
					FL
 Pursuan office or 	it to the provisions of Sections 617.0	0502 and 617.1508, Florida Sta	itules, the above-named or	orporation submits this statement for the puration's board of directors. I hereby accept	urpose of changing its registered
OINGE OF		iale di Ijonda, dagii change we	as authorized by the corpo	ration a board of directors, I horoby accept	tino appointment as registered
agent H	am familiar with, and accept the	oligations of, Section 617,8603,	Florida Statutes.		I I.
	/ /-	oligations of, Section 617,0603,			11/57
SIGNATURE	Stignature, typed or prefers name of registered	dagent and title ≠a jeicable (f	NOTE: Registered Agent signature re	quired when reinstating)	0ATE
BIGNATURE	Stigrature, typed or pretrict case of registered OF FICERS	d agent and title + a pricable (h	NOTE: Registered Agent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
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information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

904-784-8005