

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767945

FILED  
Jan 12, 2007  
Secretary of State

Entity Name: ANCHORAGE CHILDREN'S HOME OF BAY COUNTY, INC.

**Current Principal Place of Business:**

2121 LISENBY AVE  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

2121 LISENBY AVENUE  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

FEI Number: 59-2323037      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WARNER, WILLIAM G  
442 GRACE AVE  
PANAMA CITY, FL 32401 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: FOUNTAIN, WES  
Address: 449 WEST 23RD STREET  
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete  
Name: CLOUD, BARBARA  
Address: 4310 TRANSMITTER RD  
City-St-Zip: PANAMA CITY, FL 32404

Title: P ( ) Delete  
Name: JOHNSON, JOHN  
Address: 128 PALM CROSSING BLVD  
City-St-Zip: PANAMA CITY, FL 32405

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: TILLEY, RODNEY  
Address: P.O. BOX 1040  
City-St-Zip: PANAMA CITY, FL 32402

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

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

Title: VP ( ) Change (X) Addition  
Name: DALY, JOHN  
Address: 17121 PCB PARKWAY  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: S ( ) Change (X) Addition  
Name: BATTLE, CAROLYN  
Address: 202 COTTONTALE LANE  
City-St-Zip: PANAMA CITY, FL 32405

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA CLOUD

D

01/12/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date