2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# 767945

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 AVE
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:

CLOUD, BARBARA C
4310 TRANSMITTER RD
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

PUTMAN, TIMOTHY
3509 ROSEWOOD CIRCLE
PANAMA CITY, FL 32444 US

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: TIMOTHY PUTMAN 01/27/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

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

Title: C ( ) Delete
Name: DALY, JOHN
Address: 17121 PCB PARKWAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VC ( ) Delete
Name: TILLEY, RODNEY
Address: P.O. BOX 1040
City-St-Zip: PANAMA CITY, FL 32402

Title: T ( ) Delete
Name: GARDNER, JIM
Address: P.O. BOX 27121
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: S ( ) Delete
Name: CLARK, SUSAN
Address: 509 HARRISON AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: PC ( ) Delete
Name: JOHNSON, JOHN
Address: 626 LUVERNE AVE
City-St-Zip: PANAMA CITY, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PUTMAN, TIMOTHY
Address: 3509 ROSEWOOD CIRCLE
City-St-Zip: PANAMA CITY, FL 32444

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY PUTMAN D 01/27/2009
Electronic Signature of Signing Officer or Director Date