

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90186 001 ****61.25

40085450



04242007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2738211

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KINSER, MACK
7813 N LAGOON DR
UNIT 8E
PANAMA CITY, FL 32408

7. Name and Address of New Registered Agent

Name JERRY SHOOK
Street Address (P.O. Box Number is Not Acceptable)
7813 N LAGOON DR 5D
City PANAMA CITY BEACH FL 32408

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 JERRY SHOOK PRESIDENT DATE 4 24 07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE T ☒ Delete
NAME KINSER, MACK
STREET ADDRESS 3820 RIVER RD.
CITY-ST-ZIP COLUMBUS, GA 31908

TITLE P ☒ Delete
NAME KERSEY, ALLAN
STREET ADDRESS 105 ENTERPRISE CT
CITY-ST-ZIP COLUMBUS, GA 31904

TITLE VP ☒ Delete
NAME WILLIAMS, PAULA
STREET ADDRESS 7813 N LAGOON DR, UNIT 6C
CITY-ST-ZIP PANAMA CITY BCH, FL 32408

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRESIDENT ☐ Change ☒ Addition
NAME Shook, Jerry
STREET ADDRESS 7813 N. LAGOON DR 5-D
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME GARY WILKES
STREET ADDRESS 7813 N. LAGOON DR 5-B
CITY-ST-ZIP PANAMA CITY BEACH, FL 32408

TITLE SECRETARY/TREASURER ☐ Change ☒ Addition
NAME BEVERLY COPEL
STREET ADDRESS 7813 N. LAGOON DR 3B
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 4 24 07 DAYTIME PHONE # 850 2367113