

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C99000000001

FILED  
Mar 01, 2012  
Secretary of State

**Entity Name:** PENSACOLA BAY BAPTIST ASSOCIATION

**Current Principal Place of Business:**

9999 CHEMSTRAND RD  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

9999 CHEMSTRAND RD  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** 59-6018389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANIEL, JOHN P ESQ.  
501 COMMEN DENCIA  
PENSACOLA, FL 32501 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:** D  
**Name:** JOHNSON, KIMBERLY  
**Address:** 9999 CHEMSTRAND RD  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** T  
**Name:** FILLINGIM, CHARLES O  
**Address:** 6317 WHITE OAK DR  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** D  
**Name:** BOB, GREENE DR  
**Address:** 9999 CHEMSTRAND RD  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** D  
**Name:** JAMES, TRENT  
**Address:** 9999 CHEMSTRAND RD  
**City-St-Zip:** PENSACOLA, FL 32514

I hereby 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 all other like empowered.

**SIGNATURE:** DR. BOB GREENE

D

03/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date