

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002004

Entity Name: PANAMERICAN CONSULTANTS, INC.

FILED
Mar 12, 2008
Secretary of State

Current Principal Place of Business:

5910 BENJAMIN CENTER DR
STE 120
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

PO BOX 20884
ATTN: STEVEN REED
TUSCALOOSA, AL 35402

New Mailing Address:

FEI Number: 63-1001908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, PAUL L
5910 BENJAMIN CENTER DR STE 120
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

GOUGEON, RAMIE
5910 BENJAMIN CENTER DR STE 120
TAMPA, FL 33634 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: RAMIE GOUGEON

03/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: MISTOVICH, TIMOTHY S
Address: 2205 4TH STREET SUITE 21 & 22
City-St-Zip: TUSCALOOSA, AL 35401

Title: DST () Delete
Name: JAMES, STEPHEN R JR.
Address: 2205 4TH STREET SUITE 21 & 22.
City-St-Zip: TUSCALOOSA, AL 35401

Title: DV () Delete
Name: CINQUINO, MICHAEL A
Address: 2205 4TH STREET SUITE 21 & 22
City-St-Zip: TUSCALOOSA, AL 35401

Title: D (X) Delete
Name: MISTOVICH, CECILE H
Address: 2205 4TH STREET SUITE 21 & 22
City-St-Zip: TUSCALOOSA, AL 35401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY S MISTOVICH

CP

03/12/2008

Electronic Signature of Signing Officer or Director

Date