

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005451

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** BAY HAVEN PARENT TEACHER STUDENT PARTNERSHIP, INC.

**Current Principal Place of Business:**

2501 HAWKS LANDING BLVD  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

2501 HAWKS LANDING BLVD  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 59-3736489

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KITTS, TIM DR.  
2501 HAWKS LANDING BLVD  
PANAMA CITY, FL 32405 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:** P  
**Name:** CROW, NANCY  
**Address:** 1513 ALASKA CIRCLE  
**City-St-Zip:** LYNN HAVEN, FL 32444 US

**Title:** T  
**Name:** WILLIAMS, MARIA  
**Address:** 2809 REDTAIL ST  
**City-St-Zip:** PANAMA CITY, FL 32405 US

**Title:** VPF  
**Name:** WADDY, LINDA  
**Address:** 2501 HAWKS LANDING BLVD  
**City-St-Zip:** PANAMA CITY, FL 32405 US

**Title:** VPC  
**Name:** GLASS, JENNIFER  
**Address:** 2501 HAWKS LANDING BLVD  
**City-St-Zip:** PANAMA CITY, FL 32405 US

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:** MARIA WILLIAMS

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01/06/2012

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

\_\_\_\_\_  
Date