

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006582

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: POSSIBILITIES "R" UNLIMITED, INC.

**Current Principal Place of Business:**

1118 MAGNOLIA AVE.  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

1118 MAGNOLIA AVENUE  
PANAMA CITY, FL 32401

**New Mailing Address:**

FEI Number: 59-3749896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MCCAULEY, CARROLL L  
36 EAST OAK AVE.  
PANAMA CITY, FL 32401 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: A ( ) Delete  
Name: MCCAULEY, CARROLL L  
Address: 3018 COVE BLVD  
City-St-Zip: PANAMA CITY, FL 32401

Title: P ( ) Delete  
Name: HENDERSON, PHYLLIS J  
Address: 1202 MAINE AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP ( ) Delete  
Name: DENECKE, MARILYN  
Address: 2638 STATE AVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: BM ( ) Delete  
Name: PAYELLE, MARY M  
Address: 1008 HUNTINGTON DRIVE  
City-St-Zip: PANAMA CITY, FL 32401

Title: S ( ) Delete  
Name: NUTT, MARY BETH  
Address: 301 N. COVE BLVD.  
City-St-Zip: PANAMA CITY, FL 32401

Title: T ( ) Delete  
Name: PAYELLE, MARY  
Address: 1008 HUNTINGTON DRIVE  
City-St-Zip: PANAMA CITY, FL 32401

**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:

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 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: MARY JOAN PAYELLE

T

04/12/2007

Electronic Signature of Signing Officer or Director

Date