

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007603

FILED
Aug 31, 2009
Secretary of State

Entity Name: PANHANDLE CITIZENS COALITION, INC.

Current Principal Place of Business:

P. O. BOX 6683
TALLEHASSEE, FL 32314 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 6683
TALLAHASSEE, FL 32314 US

New Mailing Address:

FEI Number: 43-1979224 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HEDRICK, JOHN W
2055 THOMASVILLE RD, STE A201
TALLAHASSEE, FL 32308 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HANSON, CHAD
Address: 14 E. GRET ST. N.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V () Delete
Name: PARMENAS, GATHANA
Address: 1208 GULF AVENUE
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: MAIER, PAT
Address: 552 RIVER ROAD
City-St-Zip: CARRABELLE, FL 32322

Title: D () Delete
Name: LAMBOU, VICTOR
Address: 222 PINE LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D () Delete
Name: ROUGIER, PETE
Address: 16702 FRONT BEACH RD
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: CP () Delete
Name: HEDRICK, JOHN
Address: P.O. BOX 6683
City-St-Zip: TALLAHASSEE, FL 32314

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 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: JOHN HEDRICK

CP

08/31/2009

Electronic Signature of Signing Officer or Director

Date