

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005709

FILED
Apr 02, 2004
Secretary of State

Entity Name: CITIZENS FOR THE BAY, INC.

Current Principal Place of Business:

1222 GEORGIA AVE.
CALLAWAY, FL 32404 US

New Principal Place of Business:

P.O. BOX 19318
PANAMA CITY BEACH, FL 32417 US

Current Mailing Address:

1222 GEORGIA AVE.
CALLAWAY, FL 32404 US

New Mailing Address:

P.O. BOX 19318
PANAMA CITY BEACH, FL 32417 US

FEI Number: 75-3125384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, WILLIAM H
1222 GEORGIA AVE.
CALLAWAY, FL 32404 US

Name and Address of New Registered Agent:

BROWN, DIANE
241 TWIN LAKES DR.
PANAMA CITY BEACH, FL 32413 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: DIANE BROWN

04/02/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: BROWN, DIANE
Address: 241 TWIN LAKES DR.
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

Title: D () Change (X) Addition
Name: HEDRICK, JOHN
Address: P.O. BOX 6683
City-St-Zip: TALLAHASSEE, FL 32414 US

Title: D () Change (X) Addition
Name: HAYNES, TONYA
Address: 9927 BEDGOOD RD.
City-St-Zip: SOUTHPORT, FL 32409 US

Title: D () Change (X) Addition
Name: SHAFFER, ROSALIE
Address: 2445 PRETTY BAYOU BLVD
City-St-Zip: PANAMA CITY, FL 32405 US

Title: D () Change (X) Addition
Name: YOUNG, LINDA
Address: PO BOX 254
City-St-Zip: TALLAHASSEE, FL 32302 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE BROWN

D

04/02/2004

Electronic Signature of Signing Officer or Director

Date