

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006627

FILED
Mar 11, 2011
Secretary of State

Entity Name: OKALOOSA SAVES, INC.

Current Principal Place of Business:

5479 OLD BETHEL RD
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

5479 OLD BETHEL RD
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 57-1180395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, GILLIS E
5479 OLD BETHEL RD
CRESTVIEW, FL 32536 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: D
Name: BARLOTTA, NICHOLAS T
Address: 3158 SKYLINE DRIVE
City-St-Zip: CRESTVIEW, FL 32539

Title: D
Name: KIDNEY, DONNA
Address: 135 SE PERRY AVE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: T
Name: FORD, TERRY J
Address: 1301 INDUSTRIAL DR
City-St-Zip: CRESTVIEW, FL 32539

Title: C
Name: HOWARD, KRISTAN
Address: 17 EGLIN PKWY SE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VC
Name: PAM, TOLAR
Address: 815 BEAL PARKWAY N
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S
Name: GYORGY, AMANDA
Address: 32 NW BEAL PKWY
City-St-Zip: FORT WALTON BEACH, FL 32548

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: TERRY J. FORD

T

03/11/2011

Electronic Signature of Signing Officer or Director

Date