

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008584

FILED
Jan 19, 2005
Secretary of State

Entity Name: BUNKERS POINT EDUCATIONAL FOUNDATION, INC

Current Principal Place of Business:

1714-A WEST 23RD ST
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

1714-A WEST 23RD ST
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 20-0274027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEINER, WILLIAM B
1714-A WEST 23RD ST
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: D () Delete
Name: STEINER, WILLIAM B
Address: 1714-A WEST 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: ROBINSON, JAMES H
Address: 106 NORTH MARIE DRIVE
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: ALLEN, NEWTON A JR
Address: 1002 EAST 2ND PLAZA
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: PRATER, JANE
Address: 6223 LITTLE DIRT ROAD
City-St-Zip: PANAMA CITY, FL 32404

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:

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: WILLIAM B STEINER

D

01/19/2005

Electronic Signature of Signing Officer or Director

Date