2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N04000000404

Entity Name: BAY HIGH SCHOOL FOUNDATION, INC.

Current Principal Place of Business:

310 BUNKERS COVE ROAD
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

310 BUNKERS COVE ROAD
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 20-1093638 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARR, JIMMY D
310 BUNKERS COVE ROAD
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: PD ( ) Delete
Name: BARR, JIMMY D
Address: 310 BUNKERS COVE ROAD
City-St-Zip: PANAMA CITY, FL 32401

Title: VD ( ) Delete
Name: CHAPMAN, JEANNETTE
Address: 3412 ROBINSON BAYOU CIRCLE
City-St-Zip: PANAMA CITY, FL 32405

Title: TD ( ) Delete
Name: RIVARD, ADRIEN A III
Address: 420 WEST BEACH DRIVE
City-St-Zip: PANAMA CITY, FL 32401

Title: SD (X) Delete
Name: PERCIVAL, ANN K
Address: 322 BUNKERS COVE ROAD
City-St-Zip: PANAMA CITY, FL 32401

Title: VD ( ) Delete
Name: MOORE, SUSAN
Address: 310 SOUTH PALO ALTO AVENUE
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:

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: JIMMY D. BARR PD 04/28/2006

Electronic Signature of Signing Officer or Director — Date