2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N04000001109



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Mar 10, 2005 8:00 am
Secretary of State

FILIPINO AMERICAN REPUBLICANS OF BAY COUNTY, INC.									03	-10-200	JS 9013 ²	+ 033	6	6.23
Principal Place of Business 949 JENKS AVE., SUITE 10 PANAMA CITY, FL 32401			949	Mailing Address 949 Jenks Ave., Suite 10 Panama City, FL 32401										
2. Principal Place of Business			3. Mail	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					02072005	Chg	-NP	CR2E	037 (10	0/03)	
City & State			City & State					4. FEI Numb	er 0 7	457	51			plied For Applicable
Zip	Zip Country			Zip (5. Certificate	of Statu	us Desired			5 Add Required	
6. Name and Address of Current Register				d Agent		Name		7. Name and	d Addre	ss of New	Registere	d Agent	-	
PERRON, LEONORA 5906 IVY ROAD PANAMA CITY, FL. 32404				Street Addre			ldress (F	is (P.O. Box Number is Not Acceptable)						
	,					Carr			<u></u>				in Code	
8. The above named entity submits this statement for the pu				City						<u> </u>	F	'L	ip Code	
	named entity tions of registe		or the purp	ose of changing its	registere	d office or r	registere	ed agent, or bo	otn, in th	e State of I	-torida. Ia	m tamilia	ar with,	and accept
COMMITTEE		, t	-	•										·
SIGNATURE .	Signature, typed	or printed name of registered agen	t and title if and	icebie (NOT	- Registered	Agent signatur								
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Thereby certify that the information supplied with this litting does not qualify 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONORAS PERMITED MAIRE OF SIGNATURE AND TYPED OR PRINTED MAIRE OF SIGNAMO OFFICER OR DIRECTOR 3-8-05