

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001109

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** FILIPINO AMERICAN REPUBLICANS OF BAY COUNTY, INC.

**Current Principal Place of Business:**

5906 IVY ROAD  
PANAMA CITY, FL 32404

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 36243  
PANAMA CITY, FL 32412

**New Mailing Address:**

**FEI Number:** 20-0745751

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERRON, LEONORA  
5906 IVY ROAD  
PANAMA CITY, FL 32404 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: P ( ) Delete  
Name: PERRON, LEONORA S  
Address: 5906 IVY ROAD  
City-St-Zip: PANAMA CITY, FL 32404

Title: VP ( ) Delete  
Name: LEYVA, ART  
Address: 5289 BOB SIKES ROAD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: T ( ) Delete  
Name: APLIN, LETECIA  
Address: 2507 E 9TH CIRCLE  
City-St-Zip: PANAMA CITY, FL 32401

Title: S ( ) Delete  
Name: BOLLOTTA, ZENDA  
Address: 830 MILES DR  
City-St-Zip: PANAMA CITY, FL 32404

Title: D ( ) Delete  
Name: GRIGGS, LORENA  
Address: P.O. BOX 9053  
City-St-Zip: PANAMA CITY, FL 32417

Title: D ( ) Delete  
Name: STRUNK, CONNIE  
Address: 4918 PARK ST  
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:

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 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: LEONORA PERRON

P

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date