

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004022

FILED
May 31, 2006
Secretary of State

Entity Name: THE PENSACOLA CHAPTER OF THE UNIVERSITY OF ALABAMA NATIONAL ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

221 SOUTH BAYLEN STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

221 SOUTH BAYLEN STREET
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 20-1209665 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BLANKENSHIP, SUZANNE
4300 BAYOU BLVD STE 13
PENSACOLA, FL 32503 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: BAARS, JENNY P
Address: 221 SOUTH BAYLEN STREET
City-St-Zip: PENSACOLA, FL 32502

Title: T () Delete
Name: JONES, STEPHEN M
Address: 121 PALAFOX PL, STE C
City-St-Zip: PENSACOLA, FL 32502

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: JONES, STEPHEN M
Address: PO BOX 546
City-St-Zip: PENSACOLA, FL 32591

Title: S () Change (X) Addition
Name: WATSON, LINDA Z
Address: 7603 HELMS ROAD
City-St-Zip: PENSACOLA, FL 32526

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: STEPHEN M JONES

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05/31/2006

Electronic Signature of Signing Officer or Director

Date