2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006338

City-St-Zip:

PENSACOLA, FL 32502

FILED Jan 24, 2008 Secretary of State

Entity Name: THE PENSACOLA FILM FESTIVAL, INC. **Current Principal Place of Business: New Principal Place of Business:** 10152 SUGAR CREEK CIR PENSACOLA, FL 32514 **Current Mailing Address: New Mailing Address:** 105 FLORIDA BLANCA PENSACOLA, FL 32502 FEI Number: 20-1334642 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROUSH, TOM ROUSH, TOM 10152 SUGAR CREEK CIR 105 FLORIDA BLANCA STREET PENSACOLA, FL 32514 PENSACOLA, FL 32502 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: TOM ROUSH 01/24/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RUSHING, MICHELLE Name: Name: 223 MEADSON WAY Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: Title: VΡ () Delete (X) Change () Addition Name: ROUSH, TOM Name: ROUSH, TOM Address: 10152 SUGAR CREEK CIR Address: 105 FLORIDA BLANCA STREET City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32502 Title: () Delete Title: () Change () Addition DAUGHTRY, DENISE Name: Name: Address: 226 INTENDENCIA STREET Address: City-St-Zip: PENSACOLA, FL 32502 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RITCHIE, DEE DEE Name: Address: 591 ARAGON ST Address:

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.

City-St-Zip:

SIGNATURE: TOM ROUSH **PRES** 01/24/2008