## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004948

FILED Jan 06, 2011 Secretary of State

Entity Name: GENTS CHARITABLE FOUNDATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1411 FOUNTAIN AVENUE PANAMA CITY, FL 32401

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 222 PANAMA CITY, FL 324020222

FEI Number: 41-2165593 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:

GRIFFIN, SYLVESTER 1608 SANTA ANITA DRIVE LYNN HAVEN, FL 32444 US

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: DV

Name: CAMPBELL, JOHNNY Address: 2000 WEST 14TH STREET City-St-Zip: PANAMA CITY, FL 32401

Title: DT

 Name:
 CHASE, THOMAS

 Address:
 913 MAPLE AVENUE

 City-St-Zip:
 PANAMA CITY, FL 32401

Title: DC

Name: GRIFFIN, SYLVESTER

Address: PO BOX 10

City-St-Zip: LYNN HAVEN, FL 32444

Title: DS

 Name:
 JORDAN, JOHNNY

 Address:
 912 WILSON AVE

 City-St-Zip:
 PANAMA CITY, FL 32401

Title:

Name: PHILLIPS, KENNETH
Address: 1401 MARYLAND AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: [

Name: WILSON, ROY

Address: 105 EAST 17TH STREET City-St-Zip: LYNN HAVEN, FL 32444

I hereby 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 all other like empowered.

SIGNATURE: SYLVESTER GRIFFIN DC 01/06/2011