2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Jan 07, 2008 08:00 Al **DOCUMENT # N05000005090** Secretary of State 1. Entity Name PANAMA CITY CENTENNIAL COMMITTEE, INC. Principal Place of Business Mailing Address 2515 FRANKFORD AVENUE 2515 FRANKFORD AVENUE PANAMA CITY, FL 32405 US PANAMA CITY, FL 32405 US 01042008 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2869163 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAUNDERS, REBECCA B DO NOT WRITE 2515 FRANKFORD AVENUE PANAMA CITY, FL 32405 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title # applicable. (NOTE: Registered Agent aignature required when remetating) U00000775300 Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be 01/08/08-80022-018 61.25 Trust Fund Contribution. Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SAUNDERS, REBECCA B STREET ADDRESS 2515 FRANKFORD AVENUE CITY-ST-ZIP PANAMA CITY, FL 32405 TITLE VΡ NAME SANGER, DUTCH STREET ADDRESS 413 HARRISON AVENUE CITY-ST-ZIP PANAMA CITY, FL 32401 TITLE NAME WOMACK, MARLENE STREET ADDRESS 2101 NORWOOD PLACE DO NOT WRITE PANAMA CITY, FL 32405 CITY-ST-ZIP TITLE IN THIS SPACE NAME SOWELL, JAMES STREET ADDRESS 2313 MOUND AVENUE CITY-ST-ZIP PANAMA CITY, FL 32405 TITLE NAME STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.