

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05431

FILED
Mar 17, 2009
Secretary of State

Entity Name: THE BAPTIST MANOR, INC.

Current Principal Place of Business:

10095 HILLVIEW ROAD
PENSACOLA, FL 32514 US

New Principal Place of Business:

Current Mailing Address:

1717 N E ST.
STE. 320, ATTN. J KEHOE
PENSACOLA, FL 32501 US

New Mailing Address:

FEI Number: 59-2455515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN PORTER
1717 NE ST. STE. 320
PENSACOLA, FL 32501 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: CD () Delete
Name: PORTER, JOHN
Address: 1717 N
City-St-Zip: PENSACOLA, FL 32501

Title: VCD () Delete
Name: RAPP, DAVID J
Address: 10070 BRISTOL PARK RD
City-St-Zip: CANTONMENT, FL 32533

Title: STD () Delete
Name: HALEY, LAURA
Address: 1717 N E SE. ST 320
City-St-Zip: PENSACOLA, FL 32501

Title: AS () Delete
Name: KEHOE, JOYCE
Address: 1717 N E ST., STE. 320
City-St-Zip: PENSACOLA, FL 32501

Title: AS () Delete
Name: YADEN, DEBRA A
Address: 1717 N
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: MCGEE, ELEANOR
Address: 1717 N E SE. ST 321
City-St-Zip: PENSACOLA, FL 32501

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

Title: AS (X) Change () Addition
Name: YADEN, DEBRA A
Address: 1717 N E ST., STE. 320
City-St-Zip: PENSACOLA, FL 32501

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: JOHN PORTER

CD

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date