

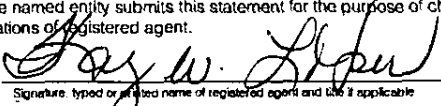
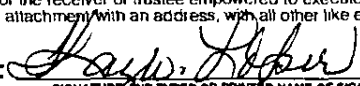


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000000239 1. Entity Name: THE FAN CLUB OF PANAMA CITY, INC.			
Principal Place of Business 2101 W. HWY 390 APT 1025 LYNN HAVEN, FL 32444		Mailing Address 616 MALLORY DR PANAMA CITY, FL 32405	
			
		01052008 No Chg-NP CR2E037 (4/06)	
		4. FEI Number 20-4068322	Applied For <input checked="" type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LOPER, KAY W 2101 W. HWY 390 APT 1025 LYNN HAVEN, FL 32444			
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE:  <small>Signature, typed or printed name of registered agent and fee if applicable</small> </div> <div style="width: 40%; text-align: right;"> DATE: 1-6-08 </div> </div>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="border: 1px solid black; padding: 5px;"> P LOPER, KAY W 2101 W. HWY 390 APT 1025 LYNN HAVEN, FL 32444 </div>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE:  Kay W. Rivard <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: 1-7-08 <small>Daytime Phone #</small>	

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06/03/08-80032-021 61.25