

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002095

FILED
May 04, 2007
Secretary of State

Entity Name: KREWE OF WHO? OF ESCAMBIA COUNTY, FLORIDA, INC.

Current Principal Place of Business:

1821 PEYTON DRIVE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

1821 PEYTON DRIVE
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-8443663 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LANDRY, JO A
1821 PEYTON DRIVE
PENSACOLA, FL 32503 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: D () Delete
Name: LYSTER, MARK
Address: 1365 EL SERENO PLACE
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: LYSTER, CHARITO
Address: 1365 EL SERENO PLACE
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: BROWN, RICHARD
Address: 1821 PEYTON DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: LANDRY, JO A
Address: 1821 PEYTON DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: DANFORTH, DANIEL
Address: 1821 PEYTON DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: DANFORTH, VANESSA
Address: 1821 PEYTON DRIVE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAGIN, MIKE
Address: 1593 WOODLAW WAY
City-St-Zip: GULF BREEZE, FL 32563

Title: VP (X) Change () Addition
Name: COOKE, GAIL
Address: 1107 ARIOLA DR
City-St-Zip: PENSACOLA BEACH, FL 32561

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

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

Title: T (X) Change () Addition
Name: TURNER, CATHERINE
Address: 5053 AVOCET LN
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change () Addition
Name: TURNER, DON
Address: 5053 AVOCET LN
City-St-Zip: PENSACOLA, FL 32504

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: CATHERINE L TURNER

T

05/04/2007

Electronic Signature of Signing Officer or Director

Date