2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# N06000004679

Entity Name: PANHANDLE CHARITABLE OPEN, INC.

Current Principal Place of Business:

202 W. JACKSON ST.
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

202 W. JACKSON ST.
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCGILL, GERALD A.
202 W. JACKSON ST.
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:	DP	( ) Delete
Name:	PEACOCK, JOHN L. JR.	
Address:	2038 HESPERIA WAY	
City-St-Zip:	PENSACOLA, FL 32505	
Title:	DV	( ) Delete
Name:	BLAND, DONALD E.	
Address:	2036 HESPERIA WAY	
City-St-Zip:	PENSACOLA, FL 32505	
Title:	DST	( ) Delete
Name:	BERNAU, SHELDON F.	
Address:	8145 BANBERRY RD.	
City-St-Zip:	PENSACOLA, FL 32514	
Title:	D	( ) Delete
Name:	GOOCH, DOUG	
Address:	3014 OAK POINTE DR.	
City-St-Zip:	PENSACOLA, FL 32505	
Title:	D	( ) Delete
Name:	GOETTER, THOMAS E.	
Address:	4813 ROSEMONT PLACE	
City-St-Zip:	PENSACOLA, FL 32514	
Title:	D	( ) Delete
Name:	MCGILL, GERALD A.	
Address:	202 W. JACKSON ST.	
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:	DST	(X) Change ( ) Addition
Name:	DELISLE, ROBERT	
Address:	5117 HIGH POINTE DRIVE	
City-St-Zip:	PENSACOLA, FL 32505	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E. GOETTER D 04/23/2007

Electronic Signature of Signing Officer or Director — Date