

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012988

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: PENSACOLA'S PROMISE, INC.

## Current Principal Place of Business:

840 W MORENO ST  
PENSACOLA, FL 32501

## New Principal Place of Business:

## Current Mailing Address:

840 W MORENO ST  
PENSACOLA, FL 32501

## New Mailing Address:

FEI Number: 20-5966578

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEPPARD, JULIE L ESQ.  
15 LAKESIDE DRIVE  
PENSACOLA, FL 32507 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: BIRDWELL, JANE  
Address: 890 S PALAFOX STREET SUITE 109  
City-St-Zip: PENSACOLA, FL 32502

Title: DT ( ) Delete  
Name: MCKINNEY, PAM  
Address: 4052 BUTLONLOUSH DR  
City-St-Zip: PENSACOLA, FL 32583

Title: ED ( ) Delete  
Name: FAIRCHILD, KRISTIN GLASS  
Address: 840 W MORENO ST  
City-St-Zip: PENSACOLA, FL 32501

Title: D ( ) Delete  
Name: PAPADELAS, ANN  
Address: 2669 BAYOU BLVD  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: BLANKENSHIP, SUZANNE  
Address: 25 WEST GOVERNMENT STREET  
City-St-Zip: PENSACOLA, FL 32502

Title: D ( ) Delete  
Name: SCHROEDER, DENNIS  
Address: 4450 CHULA VISTA  
City-St-Zip: PENSACOLA, FL 32504

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BIRDWELL, JANE  
Address: 890 S PALAFOX STREET SUITE 109  
City-St-Zip: PENSACOLA, FL 32502

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

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

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

Title: DP (X) Change ( ) Addition  
Name: BLANKENSHIP, SUZANNE  
Address: 25 WEST GOVERNMENT STREET  
City-St-Zip: PENSACOLA, FL 32502

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

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: KRISTIN FAIRCHILD

ED

01/16/2009

Electronic Signature of Signing Officer or Director

Date