## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000191

FILED Mar 01, 2009 Secretary of State

Entity Name: PANAMA CITY BEACH SENIOR SERVICES FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place of Bu	New Principal Place of Business:	
423 LYNDE PANAMA (	ELL LANE CITY BEACH, FL 32407			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
423 LYNDE PANAMA (	ELL LANE CITY BEACH, FL 32407			
FEI Number:	: 20-8106910 FEI Number Applied For ( )	FEI Number Not Applicable ( )	ertificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address of Nev	w Registered Agent:	
423 LYNDE PANAMA (	CITY BEACH, FL 32407 US			
	named entity submits this statement for the pu e of Florida.	pose of changing its registered offic	ce or registered agent, or both,	
SIGNATUF				
	Electronic Signature of Registered Ager		Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete BUTCHER, NATTA LEE 252 EAGLE DRIVE PANAMA CITY BEACH, FL 32407	Title: ( ) Ch Name: Address: City-St-Zip:	nange()Addition	
Title: Name: Address: City-St-Zip:	S ( ) Delete NEWMAN, GAYLE 211 S WELLS PANAMA CITY BEACH, FL 32413	Title: S (X) CI Name: PARENS, MUGSY Address: 3328 HARRISON A City-St-Zip: PANAMA CITY BE		
Title: Name: Address: City-St-Zip:	V ( ) Delete HAYNES, JO 112 WOODTRAIL DRIVE PANAMA CITY BEACH, FL 32413	Title: ( ) Ch Name: Address: City-St-Zip:	nange ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete SWARTOUT, SHERRY 213 SAN PABLO ST PALANA CITY BEACH, FL 32413	Title: ( ) Ch Name: Address: City-St-Zip:	nange()Addition	
Title: Name: Address: City-St-Zip:	CFO ( ) Delete ZIEGLER, IRENE 402 BURNHAM AVE PANAMA CITY BEACH, FL 32413	Title: ( ) Ch Name: Address: City-St-Zip:	nange ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete SUGGS, RUTH 22409 LAKEVIEW LANE PANAMA CITY BEACH, FL 32413	Title: D (X) CI Name: BROOKS, ROBER Address: 99 EVERGREEN S City-St-Zip: PANAMA CITY BE	ST	

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: NATTA LEE BUTCHER P 03/01/2009