

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006794

FILED
Apr 30, 2008
Secretary of State

Entity Name: ESCAMBIA COUNTY FOSTER ADOPTIVE PARENT ASSOCIATION INC

Current Principal Place of Business:

3300 NORTH PACE BLVD
SUITE 202
PENASCOLA, FL 32526

New Principal Place of Business:

250 W BURGESS ROAD
PENSACOLA, FL 32526

Current Mailing Address:

2157 ORTEGA STREET
NAVARRE, FL 32566

New Mailing Address:

P.O. BOX 17931
PENSACOLA, FL 32522

FEI Number: 20-5692361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, MERRIE DIR
7130 PENNINGTON DRIVE
PENSACOLA, FL 325263616 US

Name and Address of New Registered Agent:

GANLEY, CATHERINE E DIR.
198 WILDFLOWER LANE
PENSACOLA, FL 32514 US

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: CATHERINE GANLEY

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WATERS, GERALD L SR
Address: 2157 ORTEGA STREET
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: BRANCHCOMB, PATRICIA
Address: 7433 MOBILE HWY
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: ANTONELI, DESIREE
Address: 3315 WEST GONZALES STREET
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: GANLEY, CATHERINE
Address: 198 WILDFLOWER LANE
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change () Addition
Name: WATERS, GERALD L
Address: 2157 ORTEGA STREET
City-St-Zip: NAVARRE, FL 32566

Title: DIR. (X) Change () Addition
Name: BRANCHCOMB, PATRICIA
Address: 7433 MOBILE HWY
City-St-Zip: PENSACOLA, FL 32526

Title: DIR. (X) Change () Addition
Name: ANTONELLI, DESIREE
Address: 3315 W. GONZALES STREET
City-St-Zip: PENSACOLA, FL 32505

Title: DIR. (X) Change () Addition
Name: GANLEY, CATHERINE E
Address: 198 WILDFLOWER LANE
City-St-Zip: PENSACOLA, FL 32514

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 GANLEY

DIR.

04/30/2008

Electronic Signature of Signing Officer or Director

Date