

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005779

FILED  
Jun 14, 2011  
Secretary of State

**Entity Name:** THE GAYLE & BRIAN FOUNDATION, INC.

**Current Principal Place of Business:**

201 HARRISON AVENUE  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

201 HARRISON AVENUE  
PANAMA CITY, FL 32401

**New Mailing Address:**

FEI Number: 26-4032523

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SLOAN, TIMOTHY J  
427 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 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  
Name: PAYNTER, GAYLE B  
Address: 201 HARRISON AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

Title: D  
Name: HUMBOLDT, BRIAN L  
Address: 201 HARRISON AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

Title: D  
Name: MASKER, PHOEBE  
Address: 3304 W. 15TH STREET  
City-St-Zip: PANAMA CITY, FL 32401

Title: D  
Name: MALLARY, AVIA  
Address: 726 BUNKERS COVE ROAD  
City-St-Zip: PANAMA CITY, FL 32401

Title: D  
Name: MCNEIL, CANDE W  
Address: 475 HARRISON AVENUE, SUITE 200  
City-St-Zip: PANAMA CITY, FL 32401

I hereby 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 all other like empowered.

SIGNATURE: BRIAN HUMBOLDT

DIR

06/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date