

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13932

FILED
Apr 06, 2009
Secretary of State

Entity Name: ESCAMBIA BAY FACILITIES, INC.

Current Principal Place of Business:

2017 EVENTIDE ROAD
MILTON, FL 32583 US

New Principal Place of Business:

2013 EVENTIDE ROAD
MILTON, FL 32583 US

Current Mailing Address:

2017 EVENTIDE ROAD
MILTON, FL 32583 US

New Mailing Address:

2013 EVENTIDE ROAD
MILTON, FL 32583 US

FEI Number: 59-2884753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, BETTY E
2013 EVENTIDE RD.
MILTON, FL 32583 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: NICHOLS, COLIE
Address: 2025 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

Title: T () Delete
Name: STEPHENS, BETTY E
Address: 2013 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

Title: DS () Delete
Name: KINCAID, CHARLENE
Address: 2000 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

Title: D () Delete
Name: PERRY, JOANN
Address: 2017 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PERRY, GLEN D
Address: 2017 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

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

Title: DS (X) Change () Addition
Name: NICHOLS, FREIDA
Address: 2025 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

Title: D (X) Change () Addition
Name: PERRY, JOANNE F
Address: 2017 EVENTIDE RD.
City-St-Zip: MILTON, FL 32583

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: BETTY E. STEPHENS

T

04/06/2009

Electronic Signature of Signing Officer or Director

Date