

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N19225

1. Entity Name

BAY COUNTY COUNCIL FOR CHILDREN INC.

Principal Place of Business

CHILDREN'S HOME SOCIETY
700 W 23RD ST BLDG H
PANAMA CITY FL 32401
US

Mailing Address

P.O. BOX 794
PANAMA CITY FL 32402-0794
US

2. Principal Place of Business

KIDS

3. Mailing Address

P.O. Box 794

Suite, Apt. #, etc.

2715 Jenks Ave

Suite, Apt. #, etc.

City & State

Panama City FL

City & State

Panama City FL

Zip

32405

Country

BAY

Zip

32402

Country

BAY

6. Name and Address of Current Registered Agent

PHILLIPS, JULIA C
127 HAMILTON AVE
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name

Janie Hanks

Street Address (P.O. Box Number is Not Acceptable)

4124 Deer Point Lake DR.

City

PANAMA City FL

FL

Zip Code

32409

8. 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

Janie Hanks Janie Hanks

4-3-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete
NAME BIGGINS, ERICA
STREET ADDRESS 2859 PARADISE LAKES RD.
CITY-ST-ZIP CHIPLEY FL 32428

TITLE T ☒ Delete
NAME PHILLIPS, JULIA C
STREET ADDRESS 127 HAMILTON AVE
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE D ☒ Delete
NAME SWANSON, KIM
STREET ADDRESS 2714 GLENVIEW AVE.
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE V ☒ Delete
NAME GLASS, LORETTA L
STREET ADDRESS 921 CENTER AVE
CITY-ST-ZIP PANAMA CITY FL 32401

TITLE D ☒ Delete
NAME ANCRUM, XURIPHA
STREET ADDRESS 308 CARDIFF CT.
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE D ☒ Delete
NAME FYFE, ANN
STREET ADDRESS 632 BEACHCOMBER DR
CITY-ST-ZIP LYNN HAVEN FL 32444

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition
NAME Janie Hanks
STREET ADDRESS 4124 Deer Point Lake DR.
CITY-ST-ZIP Panama City, FL 32409

TITLE T ☒ Change ☐ Addition
NAME Gretchen Stephenson
STREET ADDRESS P.O. Box 586
CITY-ST-ZIP Panama City, FL 32402

TITLE Vice President ☒ Change ☐ Addition
NAME Samuel Fellows
STREET ADDRESS 5811 Boat Race Rd.
CITY-ST-ZIP Panama City, FL 32404

TITLE Secretary ☒ Change ☐ Addition
NAME XURIPHA Ancrum
STREET ADDRESS 308 CARDIFF CT.
CITY-ST-ZIP PANAMA City FL 32404

TITLE D ☒ Change ☐ Addition
NAME Loretta Glass
STREET ADDRESS 921 N. Center Ave.
CITY-ST-ZIP Panama City FL 32401

TITLE D ☒ Change ☐ Addition
NAME Clint Mayo
STREET ADDRESS 2916 Fairmont DR.
CITY-ST-ZIP Panama City FL 32405

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janie Hanks Janie Hanks

4-3-01

913-1500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0015780

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE