

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortheim  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N23023 (7)

1. Corporation Name

PANHANDLE CHRISTIAN CHILDREN'S HOME, INC.



Principal Place of Business

Mailing Address

9843 HWY #20 EAST  
YOUNGSTOWN FL 32466

P O BOX 28.9  
YOUNGSTOWN FL 32466  
US

3. Date Incorporated or Qualified  
10/14/1987

3a. Date of Last Report  
06/12/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
59-3059857

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JETER, LINDA A.  
9843 HIGHWAY 20 EAST  
YOUNGSTOWN FL 32466

81 Name Linda A Jeter - Director (P)  
82 Street Address (P.O. Box Number is Not Acceptable)  
9843 Hwy # 20 E  
83  
84 City Youngstown FL 85 Zip Code 32466

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Linda A Jeter*

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

*Linda A Jeter*

(NOTE: Registered Agent signature required when reinstating)

7-17-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	JETER, LINDA A.	9843 HWY. 20 EAST	YOUNGSTOWN FL 32460	<input type="checkbox"/>
VPT	TESENAIR, CHRIS	13606 E HWY #20	YOUNGSTOWN FL	<input checked="" type="checkbox"/>
ST	TESENAIR, BEVERLY	13606 E HWY #20E	YOUNGSTOWN FL	<input checked="" type="checkbox"/>
TT	TESENAIR, BEVERLY	13606 E HWY #20E	YOUNGSTOWN FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

George Thorne, D  
3132 Wood Valley Rd  
Panama City FL 32405  
Jorie Crutchfield, D  
2401 TRINITY ST.  
LYNN HAVEN, FL. 32444  
Jorie Crutchfield D  
2401 TRINITY ST.  
LYNN HAVEN, FL. 32444.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Linda A Jeter* 7-17-96 722-4663  
Linda A. Jeter.

Date

Daytime Phone #

0017074

CR2E037 (3/96)