

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26471

FILED
May 10, 2005
Secretary of State

Entity Name: GREATER PENSACOLA COMMUNITY ORGANIZATIONS, INC.

Current Principal Place of Business:

2600 W STRONG STREET (32501)
P.O. BOX 8
PENSACOLA, FL 325910008

New Principal Place of Business:

Current Mailing Address:

2600 W STRONG STREET (32501)
P.O. BOX 8
PENSACOLA, FL 325910008

New Mailing Address:

FEI Number: 59-2875693 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEMPS, WILLIE REV
1822 NORTH T STREET
PENSACOLA, FL 32505 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: CD () Delete
Name: ALTENBAUGH, RICHARD
Address: 303 S NAVY BLVD
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: FRANKLIN, LIZZIE
Address: 2809 RHYTHIM ST
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: BELLAMY, GLORIA
Address: 491 ACTION ST
City-St-Zip: PENSACOLA, FL 32514

Title: PD () Delete
Name: DEMPS, WILLIE
Address: 1822 NORTH T STREET
City-St-Zip: PENSACOLA, FL 32505

Title: FOD () Delete
Name: BROCKWAY, DONALD D
Address: 221 DEAN RD
City-St-Zip: PENSACOLA, FL 32503

Title: S () Delete
Name: SIMS, ALICE
Address: 1822 NET ST
City-St-Zip: PENSACOLA, FL 32505

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WILLIAMSON, WILLIE
Address: 2924 MISSION ROAD
City-St-Zip: PENSACOLA, FL 32505

Title: D (X) Change () Addition
Name: MAY, GENE
Address: 2600 STRONG STREET
City-St-Zip: PENSACOLA, FL 32505

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONALD D BROCKWAY

FOD

05/10/2005

Electronic Signature of Signing Officer or Director

Date