

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28963

FILED
Apr 30, 2008
Secretary of State

Entity Name: FORT WALTON BEACH EDUCATIONAL BROADCASTING FOUNDATION, INC.

Current Principal Place of Business:

233 NORTH HILL AVE.
FT. WALTON BCH., FL 32548 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1474
FT. WALTON BCH., FL 32549 US

New Mailing Address:

FEI Number: 59-2926304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORNE, JESSICA S
4723 AMHURST CIRCLE
DESTIN, FL 32541 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: PD () Delete
Name: THORNE, L.M. DR.
Address: 9412 BONEBLUFF DR
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: JAMES, JIMMY
Address: 7152 SNUG WATERS RD
City-St-Zip: NAVARRE, FL 32578

Title: VD () Delete
Name: THORNE, TERRY K
Address: P.O. BOX 1811
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: D () Delete
Name: THORNE, JUNE E
Address: 9412 BONBLUFF DRIVE
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: TERRY K. THORNE

VD

04/30/2008

Electronic Signature of Signing Officer or Director

Date