2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2012
Secretary of State

DOCUMENT# N34340

Entity Name: FAMILY SERVICE AGENCY OF BAY COUNTY, INC.

Current Principal Place of Business:

114 EAST 9TH STREET
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 752
PANAMA CITY, FL 32402 US

New Mailing Address:

114 EAST 9TH STREET
PANAMA CITY, FL 32401 US

FEI Number: 59-6013413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WISE, DIANE M
114 EAST 9TH STREET
PANAMA CITY, FL 32401 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: P
Name: WISE, DIANE
Address: 3305 E. ORLANDO ROAD
City-St-Zip: PANAMA CITY, FL 32405

Title: VPD
Name: CRAWFORD, WILLIAM
Address: 171 BYRD DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: PD
Name: CORDER, KIMBERLY
Address: 3120 AMANDA CIRCLE
City-St-Zip: PANAMA CITY, FL 32404

Title: SD
Name: BRAVO, SUSAN
Address: 125 HAMILTON AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: TD
Name: BRAVO, SUSAN
Address: 125 HAMILTON AVE
City-St-Zip: PANAMA CITY, FL 32401

I hereby 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 all other like empowered.

SIGNATURE: DIANE M. WISE ED 03/06/2012
Electronic Signature of Signing Officer or Director Date