2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008
Secretary of State

DOCUMENT# N35389

Entity Name: BIG BROTHERS/BIG SISTERS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

5514 N DAVIS HWY
BLDG D #117
PENSACOLA, FL 32503 US

New Principal Place of Business:

Current Mailing Address:

5514 N DAVIS HWY
BLDG D #117
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 59-2996893 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROWE, SHANE
30 S. SPRING ST.
PENSACOLA, FL 32501 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 ( ) Delete
Name: ROWE, SHANE
Address: 1351 MAZUREK BLVD
City-St-Zip: PENSACOLA, FL 32514

Title: V ( ) Delete
Name: SHAFFER, JOHN
Address: 2690 SEMORAN DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: S ( ) Delete
Name: ROSS, RYAN
Address: 2208 N. 14TH AVE
City-St-Zip: PENSACOLA, FL 32503

Title: T ( ) Delete
Name: JONES, ALLISON
Address: 7657 CHARTER OAKS DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete
Name: HOLMES, JIMMY
Address: 409 RUE DE ROCHEBLAVE
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete
Name: GINDL, CARL
Address: 11682 WAKEFIELD DR.
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROSS, RYAN
Address: 2208 N. 14TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

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

Title: S (X) Change ( ) Addition
Name: DOELKER, MARGOT
Address: 3470 LEMINGTON ROAD
City-St-Zip: PENSACOLA, FL 32504

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: PAULA SHELL CEO 04/07/2008
Electronic Signature of Signing Officer or Director — Date