## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39383

FILED Apr 29, 2008 Secretary of State

Entity Name: UNITARIAN-UNIVERSALIST FELLOWSHIP OF BAY COUNTY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
1410 AIRPC PANAMA C	ORT ROAD SITY, FL 32405	US		
Current Ma	ailing Address:		New Mailing Addre	ss:
PO BOX 15 PANAMA C	038 HTY, FL 32405	US		
El Number:	F	El Number Applied For()	FEI Number Not Applicable (X)	Certificate of Status Desired ( )
Name and .	Address of Curi	rent Registered Agent:	Name and Address	of New Registered Agent:
	, KEN I 11TH COURT SITY, FL 32401	US		
The above r n the State		mits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	of Florida.	mits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
n the State	of Florida. ÉE:	mits this statement for the p Bignature of Registered Ago		ed office or registered agent, or both,  Date
n the State SIGNATUR	of Florida. ÉE:	Signature of Registered Age	ent	
n the State SIGNATUR	of Florida.  E:  Electronic S	Signature of Registered Ago RS: lete	ent	Date
n the State SIGNATUR  DFFICERS  Title: Name: Address:	of Florida.  E:  Electronic S  AND DIRECTO  PD () Del SIZEMORE, KEN 1054 WEST 11TH 0	Bignature of Registered Age RS: lete COURT 32401	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date BES TO OFFICERS AND DIRECTORS
n the State BIGNATUR  DFFICERS Title: Jame: Jame: Jame: Jame: Jame: Jame: Jame: Jame:	of Florida.  E:  Electronic S  AND DIRECTO  PD () Del SIZEMORE, KEN 1054 WEST 11TH C PANAMA CITY, FL  VP () Del LAMBERT, ALINE 9346 NW LAWSON	Bignature of Registered Age  RS: Lete  COURT 32401 Lete  I RIDGE	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

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: KEN SIZEMORE PD 04/29/2008