

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90012 033 ****61.25

DOCUMENT # N43203

1. Entity Name

CHRISTIAN BAND OF BENEVOLENCE, INCORPORATED



Principal Place of Business

**916 MERCEDES AVENUE
PANAMA CITY FL 32401**

Mailing Address

**916 MERCEDES AVENUE
PANAMA CITY FL 32401**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3114801

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POLITE, ELLA SUE
916 MERCEDES AVENUE
PANAMA CITY FL 32401**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME WOOD, R.L.
STREET ADDRESS 1005 NORTH COVE BLVD.
CITY- ST- ZIP PANAMA CITY FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE D
NAME BROOKS, AUDIE
STREET ADDRESS 915 ELM AVENUE
CITY- ST- ZIP PANAMA CITY FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE D
NAME JACKSON, EDNA M.
STREET ADDRESS 1508 EAST BAY AVENUE
CITY- ST- ZIP BONIFAY FL 32425 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE D
NAME GAMMON, MATTIE
STREET ADDRESS 922 EAST 10TH COURT
CITY- ST- ZIP PANAMA CITY FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE D
NAME COWING, AUNDRAY
STREET ADDRESS 1701 HAMILTON AVENUE APT. D-128
CITY- ST- ZIP PANAMA CITY FL 32405 ☒ Delete

TITLE ☒ Change ☒ Addition
NAME Lindsey Eddie
STREET ADDRESS 936 McKenzie Avenue
CITY- ST- ZIP Panama City, FL 32401

TITLE D
NAME POPE, CARRIE
STREET ADDRESS 817 EAST 8TH CT
CITY- ST- ZIP PANAMA CITY FL 32401 ☒ Delete

TITLE ☒ Change ☒ Addition
NAME Green Mattie
STREET ADDRESS 3281 Gainer Road
CITY- ST- ZIP Chipley, FL 32428

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Audie L. Brooks* **AUDIE L. BROOKS 2-25-08**