

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44038

FILED
Apr 29, 2008
Secretary of State

Entity Name: BAY COMMUNICATIONS FOUNDATION, INC.

Current Principal Place of Business:

1216 W. 10TH STREET
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

1216 W. 10TH STREET
PANAMA CITY, FL 32406

New Mailing Address:

FEI Number: 59-3381222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, FRANKLIN R ESQ.
304 MAGNOLIA AVE.
PANAMA CITY, FL 32402 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: D () Delete
Name: DANIELS, HERMAN
Address: 5230 W. HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32401

Title: PD () Delete
Name: BAXLEY, JAMES
Address: 5230 W. HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32401

Title: S () Delete
Name: HATFIELD, SUE
Address: 5230 W. HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: TOOLE, BRENDA
Address: 1110 W 17TH STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: VP () Delete
Name: MILLS, JOE
Address: 5230 W. HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: COOK, STEVE
Address: 4230 W. HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32401

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:

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: SUE HATFIELD

S

04/29/2008

Electronic Signature of Signing Officer or Director

Date