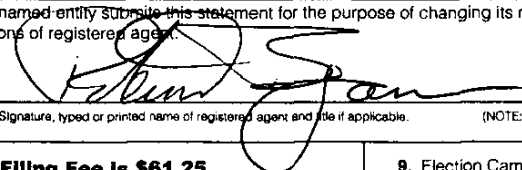
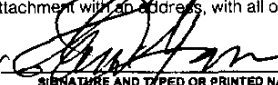


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90032 022 ****75.00

DOCUMENT # N46767 1. Entity Name SECOND CHANCE OF NORTHWEST FLORIDA, INC.					
Principal Place of Business 222 E BEACH DR PANAMA CITY, FL 32401			Mailing Address P.O. BOX 16012 PANAMA CITY, FL 32406		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
					
			02112008 Chg-NP CR2E037 (12/06)		
			4. FEI Number 59-3094842		Applied For ☐ Not Applicable
			5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WIGGIN, PEGGY 1707 LAKE DR PANAMA CITY, FL 32401			7. Name and Address of New Registered Agent Name ROBERT BRYAN, PRESIDENT Street Address (P.O. Box Number is Not Acceptable) 2113 WESTOVER CIR City PANAMA CITY FL Zip Code 32405		
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.			APRIL 29, 2008 DATE		
Filing 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 NAME STREET ADDRESS CITY-ST-ZIP	DS FRENCH, NITA 2815 LONGLEAF ROAD PANAMA CITY, FL 32405	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT KENNEDY, SANDY 708 MONTY CIRCLE PANAMA CITY, FL 32405	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED KATHY, MEADE 1110 BRADLEY CIR LYNN HAVEN, FL 32444	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MORDEN, SHERL 4502 BROOK FOREST DRIVE PANAMA CITY, FL 32404	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WIGGIN, PEGGY 1707 LAKE DRIVE PANAMA CITY, FL 32401	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROBERT BRYAN 2113 WESTOVER CIR PANAMA CITY, FL 32405 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Robert Bryan SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			April 29, 2008 (850) 527-0215 Date Daytime Phone #		