

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48812

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** WIDOWED PERSONS SERVICE CORPORATION OF BAY COUNTY, FLORIDA

**Current Principal Place of Business:**

1144 GRACE AVENUE  
PANAMA CITY, FL 32492 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2084  
PANAMA CITY, FL 32402 US

**New Mailing Address:**

**FEI Number:** 59-3128987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BURMAN, LINDA S  
1301 BECK AVE #42  
PANAMA CITY, FL 32401 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: PRES  
Name: BURMAN, LINDA  
Address: 1301 BECK AVE #42  
City-St-Zip: PANAMA CITY, FL 32401

Title: 1VP  
Name: STEEN, RUTH S  
Address: 1001 OAK AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

Title: 2VP  
Name: MILLER, DARWIN  
Address: 4918 DONALDSON ROAD  
City-St-Zip: PANAMA CITY, FL 32404

Title: SEC  
Name: PADGETT, WANDA  
Address: 110 PALO ALTO AVENUE  
City-St-Zip: PANAMA CITY, FL 32401

Title: TREA  
Name: CAREY, PEGGY  
Address: 1234 HUNTINGTON RIDGE ROAD  
City-St-Zip: LYNN HAVEN, FL 32444

I hereby 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 all other like empowered.

**SIGNATURE:** LINDA BURMAN

PRES

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date