

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N50399 (7)

1. Corporation Name

USO OF GREATER PENSACOLA AREA, INC.

Principal Place of Business

Mailing Address

NAS PENSACOLA
BUILDING 625D
PENSACOLA FL 32508
USP. O. BOX 4321
PENSACOLA FL 32507-0321
US

3. Date Incorporated or Qualified

08/13/1992

3a. Date of Last Report

01/30/1996

2. Principal Place of Business

21

Suite, Apt. #, etc

22 City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2865567

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHIBBS, VINCE JR
30 S SPRING STREET
PENSACOLA FL 32501

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC ☐ DELETE
NAME WHIBBS, VINCE JR.
STREET ADDRESS 118 WEST CERVANTES
CITY-ST-ZIP PENSACOLA STTITLE DC ☐ DELETE
NAME PENFOLD, CAPT ROBERT
STREET ADDRESS 125 WEST ROMANA STREET
CITY-ST-ZIP PENSACOLA FLTITLE DS ☒ DELETE
NAME FLOWERS, MARGARET
STREET ADDRESS 4224 SPANISH TRAIL PL.
CITY-ST-ZIP PENSACOLA FLTITLE DTC ☐ DELETE
NAME PENDLETON, BEN C
STREET ADDRESS 4630 BAYWOOD CIRCLE
CITY-ST-ZIP PENSACOLA FLTITLE DP ☒ DELETE
NAME WINDHAM, PAT
STREET ADDRESS 270 N. PALAFOX ST.
CITY-ST-ZIP PENSACOLA STTITLE DV ☐ DELETE
NAME MORRISON, JERRY
STREET ADDRESS 201 N PALAFOX STREET
CITY-ST-ZIP PENSACOLA FL1.1 TITLE DV ☒ Change ☐ Addition
1.2 NAME WHIBBS, VINCE JR.
1.3 STREET ADDRESS 118 W. CERVANTES
1.4 CITY-ST-ZIP PENSACOLA, FL 325012.1 TITLE DP ☒ Change ☐ Addition
2.2 NAME PENFOLD, CAPT ROBERT
2.3 STREET ADDRESS 125 W. ROMANA ST.
2.4 CITY-ST-ZIP PENSACOLA, FL 325013.1 TITLE DS ☐ Change ☒ Addition
3.2 NAME GILLSON, JOAN
3.3 STREET ADDRESS 6320 HARVARD CT.
3.4 CITY-ST-ZIP PENSACOLA, FL 325044.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE DC ☐ Change ☒ Addition
5.2 NAME PORTER, CHARLES W.
5.3 STREET ADDRESS 2430 AIRPORT BLVD.
5.4 CITY-ST-ZIP PENSACOLA, FL 325046.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: VINCE WHIBBS, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0072903

CR2E037 (9/96)