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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N50399

1. Corporation Name

USO OF GREATER PENSACOLA AREA, INC.

Principal Place of Business

NAS PENSACOLA
BUILDING 625D
PENSACOLA FL 32508
US

Mailing Address

P. O. BOX 4321
PENSACOLA FL 32507-0321
US

88697 90010 5



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

08/13/1992

4. FEI Number

59-2865567

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WHIBBS, VINCE JR
421 N PALAFOX ST
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

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

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

NAME PC
WHIBBS, VINCE JR.
STREET ADDRESS 421 N PALAFOX ST
CITY-ST-ZIP PENSACOLA ST 32501

TITLE ☐ DELETE

NAME V
GOODLOE, VAN J
STREET ADDRESS 30 S SPRING ST
CITY-ST-ZIP PENSACOLA FL 32501

TITLE ☒ DELETE

NAME S
HAIN, PHYLLIS
STREET ADDRESS 190 RASFORD BLVD
CITY-ST-ZIP PENSACOLA FL 32508

TITLE ☐ DELETE

NAME TC
BROWN, WHIT J
STREET ADDRESS 240 E INTENDENCIA ST
CITY-ST-ZIP PENSACOLA FL 32501

TITLE ☐ DELETE

NAME DC
CROSBY, CONSTANCE
STREET ADDRESS 732 W GARDEN ST
CITY-ST-ZIP PENSACOLA ST 32501

TITLE ☒ DELETE

NAME DC
SMITH, HON J D
STREET ADDRESS 4020 GALLAHAD RD
CITY-ST-ZIP PENSACOLA FL 32514

13.

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DC

LIBBY HARGRAVE
8 STAR LAKE DR.
PENSACOLA, FL 32507

TC

WHIT BROWN, JR.
25 W. CEDAR ST., STE. 200
PENSACOLA, FL 32501

DC

RUTH STEWART
4300 W. FRANCISCO #5
PENSACOLA, FL 32504

14. I 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, with all other like empowered.

SIGNATURE:

VINCE WHIBBS

434-5395

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)