

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90084 008 \*\*\*\*70.00

**DOCUMENT # N93000002514**

1. Entity Name  
**14 SOUTH PALAFOX PLACE, INC.**



Principal Place of Business  
**14 PALAFOX PLACE  
PENSACOLA FL 32501  
US**

Mailing Address  
**PO BOX 950  
PENSACOLA FL 32594  
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State

3. Mailing Address  
Suite, Apt. #, etc.  
City & State

4. FEI Number **59-3156757**  
Applied For  
Not Applicable

Zip Country Zip Country  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MAYGARDEN, L A  
1241 TAMARA DRIVE  
PENSACOLA FL 32504**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>OCHS, JOHN H</b> <b>5055 BAYOU BLVD</b> <b>PENSACOLA FL 32503</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO</b> <b>MAYGARDEN, LA</b> <b>1241 TAMARA DR</b> <b>PENSACOLA FL 32504</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DST</b> <b>SCHLENKER, PATRICK</b> <b>5151 N. 9TH AVE.</b> <b>PENSACOLA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BEARD, BEN W</b> <b>3740 MCCLELLAN RD</b> <b>PENSACOLA FL 32503</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HULL, WALTER D JR.</b> <b>P O BOX 2266</b> <b>PANAMA CITY FL 32402</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RICHARDS, JERRY</b> <b>91 NW RACETRACK ROAD</b> <b>FORT WALTON BEACH FL 32547</b>	<input checked="" type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del><b>Janice C. Boone</b></del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del><b>DIRECTOR</b> <b>Janice C. Boone</b> <b>70 North Baylen Street</b> <b>PENSACOLA, FL 32501</b></del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del><b>CHAIRMAN</b> <b>Dr. Eduardo Ranelli</b> <b>University of West Florida</b> <b>Pensacola, FL 32514</b></del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: **X** *John H. Ochs*

CR2E037 (10/02)

attachment

N93000002514

12/11/02

BOARD OF DIRECTORS  
14 PALAFOX

80623692

Janice C. Boone-Director  
Vice President-Regional  
Community Development  
Coordinator  
AmSouth Bank  
70 North Baylen Street  
Pensacola, FL. 32501  
Work (850) 444-1223  
Fax (850) 444-1641  
Term: 2006

Dr. Edward Ranelli-Chairman  
Dean & Professor  
College of Business  
University of West Florida  
Pensacola, FL. 32514  
Work (850) 474-2348  
Fax (850) 474-2716  
email: [eranelli@uwf.edu](mailto:eranelli@uwf.edu)  
Term: 2005

✓ Walter Deck Hull, Jr.-Director  
Hull Oil Company  
P. O. Box 2266  
Panama City, Fl. 32402  
Home (850) 763-8935  
Work (850) 763-1746  
Fax (850) 784-1338  
email: [DECKHULL@aol.com](mailto:DECKHULL@aol.com)  
Term: 2003

✓ Louis A. Maygarden-  
President/CEO  
10100 Hillview Rd. Apt. 1304  
Pensacola, Fl. 32514-5486  
Home (850) 476-8143  
Work (850) 434-0268, ext. 213  
Fax: (850) 432-5078  
email: [lmaygarden@allvista.org](mailto:lmaygarden@allvista.org)