

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005857

FILED
Mar 02, 2007
Secretary of State

Entity Name: PENSACOLA FREE FLIGHT TEAM, INC.

Current Principal Place of Business:

5928 HERMITAGE DRIVE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

5928 HERMITAGE DRIVE
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3307411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, GEORGE H
5928 HERMITAGE DRIVE
PENSACOLA, FL 32504 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: D () Delete
Name: ADKINS, EMMETT
Address: 952 GRANT PARK DRIVE
City-St-Zip: MOBILE, AL 36606

Title: VD () Delete
Name: LAWRENCE, DON
Address: 107 NORWICH RD.
City-St-Zip: GULF BREEZE, FL 32561

Title: PDC () Delete
Name: WHITE, GEORGE H
Address: 5928 HERMITAGE DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: STD () Delete
Name: CUMPSON, GARDETTE L
Address: 1432 TIGER LAKE ROAD
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: CUMPSTON, GARDETTE L
Address: 1432 TIGER LAKE DRIVE
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GARDETTE L CUMPSTON

STD

03/02/2007

Electronic Signature of Signing Officer or Director

Date