

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001817

FILED
Apr 25, 2007
Secretary of State

Entity Name: THE PENSACOLA COMMUNITY ARTS AND RECREATION ASSOCIATION INC.

Current Principal Place of Business:

1000 COLLEGE BLVD.
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

6137 PAM AVENUE
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-2963715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, LEROY E PRESIDE
6137 PAM AVENUE
PENSACOLA, FL 32526 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 () Delete
Name: WILLIAMS, LEROY E PRESIDE
Address: 6137 PAM AVE
City-St-Zip: PENSACOLA, FL 32526

Title: V () Delete
Name: GUEST, BRIAN L
Address: 1530 WITT DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: VP () Delete
Name: BENSON, JULIUS
Address: 2417 NORTH
City-St-Zip: PENSACOLA, FL 32501

Title: ASS. () Delete
Name: CHARLES, CHARISSE A ASS. PR
Address: 2467 REDOUBT AVE.
City-St-Zip: PENSACOLA, FL 32507

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

I hereby certify that the information supplied with this filing does not qualify 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: LEROY WILLIAMS

PRES

04/25/2007

Electronic Signature of Signing Officer or Director

Date