## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 19, 2004 8:00 am Secretary of State

1. Entity Nam	R PENSACOLA LADIES TI					(	)2-19-20	04 90023	3 024 ***1	50.00
4601 PIEDM	e of Business ONT ROAD FL 32503	Mailing Address POST OFFICE BOX 302 PENSACOLA, FL 3250		1		4. •	<b>g</b>	4017	346	
•										
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		•	,02132004	Cr	ng-NP	CR2E	037 (10/03)	
City & Stat	e	City & State		<b>-</b>	4. FEI Num 59-34	ber 4176	6		~ _	applied For lot Applicable
Zip	Country	Zip	Coi	untry	5. Certifica	te of St	atus Desired		\$8.75 Ac Fee Requir	
	6. Name and Address of Current	Registered Agent			7. Name ar	nd Add	ress of Nev	/ Registere	i Agent	
DALINIZ IA	/HITE, LINDA			Name						
4601 PIED	MONT ROAD DLA, FL 32503	•	31	Street Add	ress (P.O. Box Num	ber is N	Not Accepte	bie)		
		eta ANGELLAN	_		:					
	r 2, p 3 - 3	; 5 p		City	,			F	L Zip Co	de
, V.										
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOT	E: Registere	ed Agent signature r	required when reinstating)	·		DATE		
	Signature, typed or printed name of registered egen Filling Fee is \$61.25 Due by May 1, 2004	9. Election Cal Trust Fund 6	mpaign F Contribut	Financing Lion.	\$5.00 May Added to Fee	<b>3</b> S		Make che lorida Dep	ck payable artment of !	State
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12.7 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 turther 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 attaching with an address, with all other like empowered.

CHY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone •