

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 28, 2008 8:00 am
Secretary of State

08-28-2008 90001 007 ****61.25

DOCUMENT # N98000005935 1. Entity Name SANTA IS A SENIOR CITIZEN INC.																																																																																																																											
Principal Place of Business 3991 DELISA AVE PANAMA CITY, FL 32404		Mailing Address 3991 DELISA AVE PANAMA CITY, FL 32404																																																																																																																									
2. Principal Place of Business - No P.O. Box # 6913 Cherry Street Suite, Apt. #, etc. Apt W City & State Panama City FL Zip 32404		3. Mailing Address 6913 Cherry Street Suite, Apt. #, etc. Apt W City & State Panama City Florida Zip 32404																																																																																																																									
		01142008 Chg-NP CR2E037 (12/06)																																																																																																																									
4. FEI Number 59-3502056		Applied For <input type="checkbox"/> Not Applicable																																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																											
6. Name and Address of Current Registered Agent HAYNES, SHARON L 3991 DELISA AVE PANAMA CITY, FL 32404		7. Name and Address of New Registered Agent Name: Haynes Sharon Street Address (P.O. Box Number is Not Acceptable) 6913 Cherry Street Apt W City: Panama City FL Zip Code: 32404																																																																																																																									
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: Sharon L. Haynes 8/25/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																											
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																									
Make check payable to Florida Department of State																																																																																																																											
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Sharon L. Haynes President & Treasurer 8/25/08 850-481-0453 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																											