

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046229

FILED
Apr 09, 2009
Secretary of State

Entity Name: CHB OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

4400 BAYOU BLVD #4A
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

4400 BAYOU BLVD STE 4A
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3645712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORHEAD, STEPHEN R
25 WEST GOVERNMENT ST
PENSACOLA, FL 32502 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROGERS, MILTON C
Address: P.O. BOX 2172 N/A
City-St-Zip: PENSACOLA, FL 32513

Title: P () Delete
Name: PORTER, MARK E
Address: 3694 SCENIC HWAY
City-St-Zip: PENSACOLA, FL 32514

Title: VP () Delete
Name: LADNER, IRENE F
Address: 7634 BROOK FOREST DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: V () Delete
Name: HOLCOMB, JEFFREY S
Address: 1002 E TEN MILE RD
City-St-Zip: PENSACOLA, FL 32514

Title: VP () Delete
Name: THOMAS, CHERYL
Address: 4400 BAYOU BLVD STE 4A
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROGERS, MILTON C
Address: P.O. BOX 2172
City-St-Zip: PENSACOLA, FL 32513

Title: P (X) Change () Addition
Name: PORTER, MARK E
Address: 997 BLACK WALNUT TRAIL
City-St-Zip: PENSACOLA, FL 32514

Title: VP (X) Change () Addition
Name: MORRIS, DAVID H
Address: 4168 N CAMBRIDGE WAY
City-St-Zip: PACE, FL 32571

Title: VP (X) Change () Addition
Name: HOLCOMB, JEFFREY S
Address: 10823 COUNTRY OSTRICH DRIVE
City-St-Zip: PENSACOLA, FL 32534

Title: VP (X) Change () Addition
Name: THOMAS, CHERYL
Address: 4948 PINEVIEW RIDGE RD
City-St-Zip: PACE, FL 32571

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERYL THOMAS

VP

04/09/2009

Electronic Signature of Signing Officer or Director

Date