

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049218

Entity Name: THE PENSACOLA SIX, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

901 EAST YONGE STREET
PENSACOLA, FL 32503 US

New Principal Place of Business:

Current Mailing Address:

901 EAST YONGE STREET
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 59-3802140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, JOHN P CPA
901 EAST YONGE STREET
PENSACOLA, FL 32503 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: P () Delete
Name: SCOTT, JOHN P CPA
Address: 901 EAST YONGE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: VP () Delete
Name: VAN DER LIKE, DAVID
Address: 901 EAST YONGE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: SEC () Delete
Name: SCOTT, LEROY JR.
Address: 901 EAST YONGE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: TREA () Delete
Name: MCLAUGHLIN, WILLIAM
Address: 901 EAST YONGE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: DIR () Delete
Name: KOZELL, RONALD C
Address: 901 EAST YONGE STREET
City-St-Zip: PENSACOLA, FL 32503

Title: DIR () Delete
Name: HABURAY, J. KEITZ PHD
Address: 6000 KEATING ROAD
City-St-Zip: PENSACOLA, FL 32504

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

SIGNATURE: JOHN P SCOTT

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date