

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008858

**Entity Name:** BERNICE R. SHANKLIN CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

950 BAY DRIVE  
NICEVILLE, FL 32578

**Current Mailing Address:**

PO BOX 87  
FORT WALTON BEACH, FL 32549 US

**FEI Number: 26-0873610**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SALTMARSH, CLEVELAND & GUND  
34 WALTER MARTIN ROAD  
FORT WALTON BEACH, FL 32548 US

*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: NICOLE FIFE**

**02/08/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE  
Name SHANKLIN, BERNICE R  
Address 950 BAY DRIVE  
City-State-Zip: NICEVILLE FL 32578

Title TRUSTEE  
Name SHANKLIN, CHARLES R.  
Address 950 BAY DRIVE  
City-State-Zip: NICEVILLE FL 32578

Title TRUSTEE  
Name SHIELDS, ANN E  
Address P.O. BOX 1553  
City-State-Zip: ORLANDO FL 32802

Title TRUSTEE  
Name SHANKLIN, THOMAS E.  
Address 2206 MIDDLE BEAR CREEK ROAD  
City-State-Zip: VICTOR MT 59875

Title TRUSTEE  
Name BROOKS, JEAN C.  
Address 7687 HIGHWAY 393  
City-State-Zip: LAUREL HILL FL 32567

*I hereby 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 all other like empowered.*

**SIGNATURE: CHARLES R SHANKLIN**

**TRUSTEE**

**02/08/2019**

Electronic Signature of Signing Officer/Director Detail

Date