

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704427

FILED
Apr 30, 2009
Secretary of State

Entity Name: PENSACOLA NAVY FLYING CLUB INC

Current Principal Place of Business:

4545 JERRY MARYGARDEN BLVD.
PENSACOLA, FL 32504 US

New Principal Place of Business:

Current Mailing Address:

PENSACOLA NAVY FLYING CLUB
P O BOX 15519
PENSACOLA, FL 32514 US

New Mailing Address:

FEI Number: 73-6502393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOYNER, RON
8260 MOBILE HWY
PENSACOLA, FL 32526 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

OFFICERS AND DIRECTORS:

Title: DP Delete
Name: MALIN, GARY
Address: 2566 SYLTE LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: DT Delete
Name: JOYNER, RON
Address: 8260 MOBILE HWY
City-St-Zip: PENSACOLA, FL 32526

Title: DS Delete
Name: JENISTA, JOHN
Address: 2030 HESPERIA WAY
City-St-Zip: PENSACOLA, FL 32505

Title: DV Delete
Name: HAMLN, PAUL
Address: 3964 PARAOISE BAY DR.
City-St-Zip: GULF BREEZE, FL 32563

Title: DP Delete
Name: CASSOUTT, JAMES
Address: 24091 COUNTY ROAD 83
City-St-Zip: ROBERTSDALE, AL 36567

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

SIGNATURE: RON JOYNER

DT

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date