

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729275

FILED
Mar 14, 2010
Secretary of State

Entity Name: LAVALLET TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

MONTGOMERY MANAGEMENT ASSOCIATES, INC.
33 SOUTH 9TH AVE
PENSACOLA, FL 32502

New Principal Place of Business:

PROFESSIONAL ASSOCIATION MANAGERS, LLC
33 SOUTH 9TH AVE
PENSACOLA, FL 32502

Current Mailing Address:

P. O. BOX 12507
PENSACOLA, FL 325912507

New Mailing Address:

FEI Number: 59-2244662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, SUSAN L
33 SOUTH 9TH AVE
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

OFFICERS AND DIRECTORS:

Title: PD
Name: FOWLER, RICHARD
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

Title: VP
Name: BREWTON, BILLY
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

Title: SD
Name: DOMBEY, JIM
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

Title: TD
Name: ARBOGAST, LURTY C
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

Title: D
Name: ROHRBERGER, ANN
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

Title: D
Name: ROSENAU, PENNY
Address: 33 SOUTH 9TH AVE
City-St-Zip: PENSACOLA, FL 32502

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: RICHARD FOWLER

P

03/14/2010

Electronic Signature of Signing Officer or Director

_____ Date