

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758552

FILED
Feb 12, 2009
Secretary of State

Entity Name: SOLANA SHORES OWNERS ASSOC., INC.

Current Principal Place of Business:

14761 PERDIDO KEY DR
PENSACOLA, FL 32507 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 34065
PENSACOLA, FL 32507 US

New Mailing Address:

181 W OAKRIDGE PK
METAIRIE, LA 70005 US

FEI Number: 59-2320835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBORAH, WATERS
6200 DON CARLOS DR
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

JONES, RICKEY N MR.
14761 PERDIDO KEY DR
5
PENSACOLA, FL 32507 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: RICKEY N JONES

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JENS, DANIEL K
Address: 181 W OAKRIDGE PARK
City-St-Zip: METAIRIE, LA 70005

Title: SD () Delete
Name: LATSHAW, TODD
Address: 1001 N BARCELONA
City-St-Zip: PENSACOLA, FL 32501

Title: TD () Delete
Name: JONES, RICK
Address: P O BOX 120
City-St-Zip: RABUN GAP, GA 30568

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JONES, RICKEY N
Address: 14761 PERDIDO KEY DR #5
City-St-Zip: PENSACOLA, FL 32507

Title: VP (X) Change () Addition
Name: MANNING, JERRY
Address: P O BOX 1728
City-St-Zip: TUSCALOOSA, AL 35403

Title: SD (X) Change () Addition
Name: JENS, DANIEL
Address: 181 W OAKRIDGE PK
City-St-Zip: METAIRIE, LA 70005

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: RICKEY N JONES

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date