

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766982

FILED
Apr 28, 2006
Secretary of State

Entity Name: SAN DE LUNA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 11690
PENSACOLA, FL 32524 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11690
PENSACOLA, FL 32524 US

New Mailing Address:

FEI Number: 59-2390024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, J STEVEN
107 N PALAFOX ST
PENSACOLA, FL 32501 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 () Delete
Name: JIPSON, JIM
Address: 1430 EAST LAKEVIEW
City-St-Zip: PENSACOLA, FL 32503

Title: SD () Delete
Name: HATCHER, LOIS
Address: 1145 CEYLON COURT
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: GAROFANO, PATRICK
Address: 30427 MIDDLE CREEK CIRCLE
City-St-Zip: DAPHNE, AL 36527

Title: D () Delete
Name: TURNUPSEED, JEAN
Address: 6 MOUNT VIEW COURT
City-St-Zip: MANCHESTER, MO 63011

Title: D () Delete
Name: GAROFANO, RICHARD
Address: 2405 W. 124TH STREET
City-St-Zip: LEAWOOD, KS 66209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HATCHER, LOIS
Address: 5785 COBBLE CREEK DRIVE
City-St-Zip: PACE, FL 32571

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DOUGLAS, ANNETTE
Address: 711 WESTOVER ROAD
City-St-Zip: WHITEMAN AFB, MO 65305

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM JIPSON

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date