2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 13, 2005
Secretary of State

DOCUMENT# 770863

Entity Name: THE MOORINGS OF PERDIDO KEY II, INC.

Current Principal Place of Business:

C/O JOHN WELCH
1017 NORTH 12TH AVENUE
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

C/O JOHN WELCH
1017 NORTH 12TH AVENUE
PENSACOLA, FL 32501

New Mailing Address:

GWEN MANISCALCO
4608 ALEXANDER DRIVE
METAIRIE, LA 70003

FEI Number: 58-1777098 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WELCH, JOHN P REG. AG
1017 NORTH 12TH AVENUE
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: MANISCALCO, GWEN
Address: 4608 ALEXANDER DR
City-St-Zip: METAIRIE, LA 70003

Title: VD ( ) Delete
Name: KLEIN, KEN
Address: 6117 FLOWER DR
City-St-Zip: METAIRIE, LA 70003

Title: STD ( ) Delete
Name: PEASE, HERB,
Address: 4717 FLETCHER DR
City-St-Zip: FORT WORTH, TX

Title: D ( ) Delete
Name: GORDON, JOHN
Address: 4516 SHERIDAN AVE
City-St-Zip: METAIRIE, LA 70002

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GWEN MANISCALCO PD 06/13/2005

Electronic Signature of Signing Officer or Director Date