2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000581

FILED Feb 08, 2006 Secretary of State

Entity Name: BAYOU PLACE OF ESCAMBIA COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4400 BAYOU BLVD STE 35 PENSACOLA, FL 32503

New Mailing Address: Current Mailing Address:

4400 BAYOU BLVD P.O. BOX 36262

STE 35 PENSACOLA, FL 325166262 PENSACOLA, FL 32503

FEI Number: 59-3651697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHALK, WESLEY 4400 BÁYOU BLVD. **STE 35**

PENSACOLA, FL 32503 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition COOKE, ROY GUY, DAVID S Name: Name: 7909 RED BEAN DR Address: 8020 CAYENNE WAY Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: Title: () Delete (X) Change () Addition COLEMAN, CHARLES Name: JONES, JIM Name:

Address: 7986 CAYENNE WAY Address: 2951 CREOLE WAY City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: () Delete Title: **TRES** (X) Change () Addition

PIERSON, EVELYN HALE, TERRY Name: Name: Address: 8013 CAYENNE WAY Address: 2979 CREOLE WAY City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: () Delete Title: SEC (X) Change () Addition

STEVENS, ANTHONY Name: Name: CALVERT, JOMICHELLE 7957 RED BEAN DR Address: Address: 7944 RED BEAN DRIVE City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: () Delete Title: OFCR (X) Change () Addition

CASTEEL, KEVIN KERELL, BILL Name: Name: 2994 CREOLE WAY Address: Address: 3047 CREOLE WAY City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

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: DAVID S. GUY **PRES** 02/08/2006