

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04796

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: VILLAS ON THE SQUARE CONDOMINIUM ASSOCIATION OF PENSACOLA, INC.

**Current Principal Place of Business:**

5001 GRANDE DRIVE  
PENSACOLA, FL 32504

**New Principal Place of Business:**

5001 GRANDE DR  
PENSACOLA, FL 32504

**Current Mailing Address:**

P.O BOX 12507  
PENSACOLA, FL 32591

**New Mailing Address:**

PO BOX 12507  
PENSACOLA, FL 32591 US

FEI Number: 59-2420136

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 ( ) Delete  
Name: WILLIS, WAYNE P  
Address: 5001 GRANDE DRIVE UNIT 1111  
City-St-Zip: PENSACOLA, FL 32504

Title: SD ( ) Delete  
Name: JONES, STEPHEN M  
Address: 5001 GRANDE DRIVE UNIT 1221  
City-St-Zip: PENSACOLA, FL 32504

Title: TD ( ) Delete  
Name: MOUDRY, GAYLA R  
Address: 2713 DELUNA WAY  
City-St-Zip: MILTON, FL 32583

Title: DIR ( ) Delete  
Name: CARNLEY, CARL  
Address: 412 KENILWORTH AVENUE  
City-St-Zip: GULF BREEZE, FL 32561

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WILLIS, WAYNE P  
Address: 33 SOUTH 9TH AVE  
City-St-Zip: PENSACOLA, FL 32502

Title: VPD (X) Change ( ) Addition  
Name: CARNLEY, CARL  
Address: 33 SOUTH 9TH AVE  
City-St-Zip: PENSACOLA, FL 32502

Title: SD (X) Change ( ) Addition  
Name: JONES, STEPHEN M  
Address: 33 SOUTH 9TH AVE  
City-St-Zip: PENSACOLA, FL 32502

Title: TD (X) Change ( ) Addition  
Name: MOUDRY, GAYLA R  
Address: 33 SOUTH 9TH AVE  
City-St-Zip: PENSACOLA, FL 32502

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: STEPHEN M JONES

SD

02/04/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date