

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11122

FILED
Feb 24, 2009
Secretary of State

Entity Name: TOWNE SQUARE HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

5051 GRANDE DR M-3
PENSACOLA, FL 32504

New Principal Place of Business:

5051 GRANDE DR
UNIT I-2
PENSACOLA, FL 32504

Current Mailing Address:

P.O. BOX 30465
PENSACOLA, FL 325031465

New Mailing Address:

5051 GRANDE DR
UNIT I-2
PENSACOLA, FL 32504

FEI Number: 59-2607260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, SIDNEY
5251 GRANDE DRIVE
M-3
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

LANGSTON, EUGENE TREAS
5251 GRANDE DRIVE
I-2
PENSACOLA, FL 32504 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: EUGENE P. LANGSTON

02/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WOERNER, JUDY
Address: 5051 GRANDE DR D-2
City-St-Zip: PENSACOLA, FL 32504

Title: VP () Delete
Name: SHANNON, CONNIE
Address: 5051 GRANDE DR E-3
City-St-Zip: PENSACOLA, FL 32504

Title: T () Delete
Name: INOODS, SIDNEY
Address: 5051 GRANDE DR., M-3
City-St-Zip: PENSACOLA, FL 32504

Title: S () Delete
Name: ROGERS, MARTHA
Address: 5051 GRANDE DR A-1
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARGER, LINDA
Address: 5051 GRANDE DR L-2
City-St-Zip: PENSACOLA, FL 32504

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

Title: T (X) Change () Addition
Name: LANGSTON, EUGENE
Address: 5051 GRANDE DR., I-2
City-St-Zip: PENSACOLA, FL 32504

Title: S (X) Change () Addition
Name: WOERNER, JUDY
Address: 5051 GRANDE DR D-2
City-St-Zip: PENSACOLA, FL 32504

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: EUGENE P. LANGSTON

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02/24/2009

Electronic Signature of Signing Officer or Director

Date