

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28853

FILED
Apr 10, 2009
Secretary of State

Entity Name: HOMEPORT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1719 N 9TH AVE
PENSACOLA, FL 32503

New Principal Place of Business:

4400 BAYOU BLVD
#58
PENSACOLA, FL 32503

Current Mailing Address:

1719 N 9TH AVE
PENSACOLA, FL 32503 US

New Mailing Address:

4400 BAYOU BLVD
#58
PENSACOLA, FL 32503 US

FEI Number: 59-3248374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REALTY MASTERS OF FL.
1719 NORTH 9TH AVE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

REALTY MASTERS OF FL.
4400 BAYOU BLVD
#58
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: PAMELA A. KEEN

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NIEMIEC, DARLENE
Address: 1450 HOMOPO RT DR.
City-St-Zip: NAVARRE, FL 32566

Title: P () Delete
Name: STACK, GREG
Address: 1401 HOME PORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: VP () Delete
Name: WILBURN, JASON
Address: 1414 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: CAMPBELL, LINDA
Address: 1448 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: S () Delete
Name: MASON, JASON
Address: 1494 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: T () Delete
Name: GROTH, KEITH
Address: 1413 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NIEMIEC, DARLENE
Address: 1450 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: P (X) Change () Addition
Name: STACK, GREG
Address: 1401 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

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

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

Title: S/T (X) Change () Addition
Name: MASON, JAY
Address: 1494 HOMEPORT DR.
City-St-Zip: NAVARRE, FL 32566

Title: D (X) Change () Addition
Name: KEOHANE, TIMOTHY
Address: 1466 HOMEPORT
City-St-Zip: NAVARRE, FL 32566

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: GREGORY STACK

P

04/10/2009

Electronic Signature of Signing Officer or Director

Date