

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002304

FILED
Feb 06, 2009
Secretary of State

Entity Name: GRAND MANOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4400 BELLVIEW
PENSACOLA, FL 32526 US

New Principal Place of Business:

4400 BELLVIEW AVE
PENSACOLA, FL 32526 US

Current Mailing Address:

POB 12507
PENSACOLA, FL 32591 US

New Mailing Address:

PO BOX 12507
PENSACOLA, FL 32591 US

FEI Number: 59-3411951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, SUSAN
33 S 9TH AVE
PENSACOLA, FL 32591 US

Name and Address of New Registered Agent:

MOODY, SUSAN L
33 SOUTH 9TH AVE
PENSACOLA, FL 32502 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: SUSAN L MOODY

02/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEPHENS, TEXANN
Address: 4420 BELLVIEW
City-St-Zip: PENSACOLA, FL 32526

Title: VP () Delete
Name: PEEVY, MARGARET
Address: 4418 BELLVIEW
City-St-Zip: PENSACOLA, FL 32526

Title: DS () Delete
Name: FOUNTAIN, JUDY
Address: 4444 BELLVIEW 6A
City-St-Zip: PENSACOLA, FL 32526

Title: DT () Delete
Name: LASOTA, JOANN
Address: 4404 BELLVIEW 1A
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change () Addition
Name: LASOTA, JOANN
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: TEXANN STEPHENS

PD

02/06/2009

Electronic Signature of Signing Officer or Director

Date