

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 762058

**FILED**  
**Feb 24, 2021**  
**Secretary of State**  
**2754788572CC**

**Entity Name:** THE PENSACOLA SCENIC ARMS CONDOMINIUM ASSOCIATI  
ON, INC.

**Current Principal Place of Business:**

600 SCENIC HWY  
PENSACOLA, FL 32503

**Current Mailing Address:**

600 SCENIC HWY  
OFFICE  
PENSACOLA, FL 32503 US

**FEI Number: 59-2398881**

**Certificate of Status Desired: No**

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

WALDROP, RICK  
600 SCENIC HWY  
OFFICE  
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: RICK WALDROP**

**02/24/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            CARNEY, JOE  
Address        600 SCENIC HWY  
                  #207  
City-State-Zip: PENSACOLA FL 32503

Title            TREASURER  
Name            WALDROP, RICK  
Address        600 SCENIC HWY  
                  #212  
City-State-Zip: PENSACOLA FL 32503

Title            D  
Name            REYNOLDS, CHRIS  
Address        600 SCENIC HWY  
                  #119  
City-State-Zip: PENSACOLA FL 32503

Title            D  
Name            INMAN, JIM  
Address        600 SCENIC HWY  
                  #109  
City-State-Zip: PENSACOLA FL 32503

*I hereby 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 all other like empowered.*

**SIGNATURE: RICK WALDROP**

**TREASURER**

**02/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date