

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# 714684

Entity Name: WEST FLORIDA HISTORIC PRESERVATION, INC.

Current Principal Place of Business:

120 EAST CHURCH STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

P O BOX 12866
PENSACOLA, FL 32576

New Mailing Address:

FEI Number: 23-7009319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROSNAHAM, RICHARD
120 E CHURCH ST
PENSACOLA, FL 32501 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: CD () Delete
Name: BOWDEN, J EARLE
Address: 2220 MCCUTCHEN PL
City-St-Zip: PENSACOLA, FL 00000, 32503

Title: D () Delete
Name: MARX, MORRIS DR
Address: 40 S ALCANIZ ST
City-St-Zip: PENSACOLA, FL 32501

Title: DV () Delete
Name: RENTZ, LUCY
Address: 4795 VELASQUEZ PLACE
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: LANGHORNE, PATSY
Address: 42 STAR LAKE DRIVE
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: CURRIN, B.M. DR.
Address: 18 WEST WRIGHT STREET
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: QUINA, CARTER
Address: 400 WEST ROMANA STREET
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: BOWDEN, J. EARLE
Address: 2220 MCCUTCHEN PLACE
City-St-Zip: PENSACOLA, FL 32503

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

Title: DV (X) Change () Addition
Name: RENTZ, LUCY
Address: 4795 VELASQUEZ PLACE
City-St-Zip: PENSACOLA, FL

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

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

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

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: J. EARLE BOWDEN

D

04/03/2009

Electronic Signature of Signing Officer or Director

Date