

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730559

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** NORTH HILL PRESERVATION ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 12451  
PENSACOLA, FL 32591

**New Principal Place of Business:**

1011 NORTH REUS STREET  
PENSACOLA, FL 32501

**Current Mailing Address:**

P.O. BOX 12451  
PENSACOLA, FL 325912451

**New Mailing Address:**

**FEI Number:** 23-7437278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILHELM, STEPHANIE C  
1011 N. REUS STREET  
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: PD ( ) Delete  
Name: WILHELM, STEPHANIE C  
Address: 1011 N REUS STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: TD ( ) Delete  
Name: CRAWFORD, WILLIAM  
Address: 1017 N PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete  
Name: PETERANECZ, ISTVAN  
Address: 113 W STRONG STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: SD ( ) Delete  
Name: LATSHAW, MILDRED  
Address: 1001 N BARCELONA STREET  
City-St-Zip: PENSACOLA, FL 32501

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: STEPHANIE C. WILHELM

PD

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date