

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90079 013 ****61.25

DOCUMENT # 743838

1. Entity Name

TREEHOUSE SUBDIVISION ASSOCIATION, INC.

Principal Place of Business

Mailing Address

327 FT. PICKENS RD.
PENSACOLA FL 32561
US

372 FT PICKENS RD
PENSACOLA FL 32561
US

2. Principal Place of Business

372 FT. PICKENS RD.

Suite, Apt. #, etc.

3. Mailing Address

372 FT. PICKENS RD.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PENSACOLA BEACH FL

City & State

PENSACOLA BEACH FL

4. FEI Number

59-1874196

Applied For

Not Applicable

Zip

32561

Country

USA

Zip

32561

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEIRCE, FRANK H.

327 FT. PICKENS RD.
PENSACOLA BCH FL 32561

Name

Street Address (P.O. Box Number is Not Acceptable)

372 FT. PICKENS RD

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Delete
NAME	PEIRCE, FRANK H.	
STREET ADDRESS	372 FT. PICKENS ROAD	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	ST	☐ Delete
NAME	PEIRCE, SHARON	
STREET ADDRESS	372 FT. PICKENS ROAD	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	V	☒ Delete
NAME	KIRK, CAROLYN	
STREET ADDRESS	376 FT. PICKENS RD.	
CITY-ST-ZIP	PENSACOLA BCH FL	
TITLE	D	☒ Delete
NAME	PERRY, CLAIRE	
STREET ADDRESS	5403 ADMIRAL DOYLE RD.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	☒ Delete
NAME	ALLEN, TOM	
STREET ADDRESS	382 FT PICKENS ROAD	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	☒ Change ☐ Addition
NAME	ALLEN, TOM	
STREET ADDRESS	382 FT. PICKENS RD	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	SOUTHWORTH, EDWARD	
STREET ADDRESS	380 FT. PICKENS RD.	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	AHERN, DANIEL	
STREET ADDRESS	370 FT. PICKENS RD.	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	BEAUGH, RICHARD JR.	
STREET ADDRESS	386 FT. PICKENS RD.	
CITY-ST-ZIP	PENSACOLA BEACH FL 32561	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Frank H. Peirce
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-02 859 932 4938
 Date Daytime Phone #

CR2E037 (9/01)