2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# 765110

Entity Name: COLLEGE HEIGHTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 US

New Principal Place of Business:

Current Mailing Address:

2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 US

New Mailing Address:

FEI Number: 59-2249983 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POINTS, DONNA J
2300 W MICHIGAN AVE
19
PENSACOLA, FL 32526 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:	RUMINSKI, STEPHEN	
Address:	4253 BROOKSIDE DRIVE	
City-St-Zip:	PENSACOLA, FL 32503	
Title:	VD	( ) Delete
Name:	POGUE, DELARIAN	
Address:	3202 SAMANTHA DR	
City-St-Zip:	CANTONMENT, FL 32533	
Title:	SD	( ) Delete
Name:	KRISTAN, WARREN	
Address:	2811 LANGLEY AVE 209	
City-St-Zip:	PENSACOLA, FL 32504	
Title:	TS	( ) Delete
Name:	YOUNGBLOOD, DIANNE L	
Address:	6826 EAST GATE ROAD	
City-St-Zip:	MILTON, FL 32570	

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: DIANNE L YOUNGBLOOD TREA 04/21/2009

Electronic Signature of Signing Officer or Director — Date