

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770309

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** SAN LUIS ON THE PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1575 SAN LUIS ON THE PARK  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

1575 SAN LUIS ON THE PARK  
TALLAHASSEE, FL 32304

**New Mailing Address:**

**FEI Number:** 59-2787764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAUMAN, SENE  
1569 SAN LUIS ON THE PARK  
TALLAHASSEE, FL 32304 US

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

SENE BAUMAN  
1575 SAN LUIS ON THE PARK  
TALLAHASSEE, FL 32304 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:** SENE BAUMAN

01/05/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BAUMAN, SENE  
**Address:** 1569 SAN LUIS ON THE PARK  
**City-St-Zip:** TALLAHASSEE, FL 32304

**Title:** D  
**Name:** BRASWELL, ROBERT  
**Address:** 1563 SAN LUIS ON THE PARK  
**City-St-Zip:** TALLAHASSEE, FL 32304

**Title:** SD  
**Name:** FOXON, MARGUERITE  
**Address:** 1567 SAN LUIS ON THE PARK  
**City-St-Zip:** TALLAHASSEE, FL 32304

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:** MARGUERITE FOXON

SD

01/05/2010

Electronic Signature of Signing Officer or Director

Date