2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002499

FILED May 29, 2004 Secretary of State

Entity Name: PENSACOLA CHARTER HALL BUILDING ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 519 N PALAFOX ST PENSACOLA, FL 32501 **Current Mailing Address: New Mailing Address:** 519 N PALAFOX ST PENSACOLA, FL 32501 FEI Number: 23-7142603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRIVISON, BRIAN BLAKE, CHRIS 519 N PALAFOX ST 519 N PALAFOX ST PENSACOLA, FL 32501 US US PENSACOLA, FL 32501 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: CHRIS BLAKE 05/29/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MCCLUSKY, M J Name: Name: 398 MILLS AVE Address: Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: () Delete Title: Title: () Change () Addition BRUNO, PAUL JR Name: Name: Address: 619 N BAYLEN ST Address: City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: Title: () Delete Title: () Change () Addition MARGIOTTI, VINCENT Name: Name: Address: 3835 POTOSI RD Address: City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: TRONU, ROBERT A Name: KEANE, PHILLIP 7761 GRUNDY ST. Address: 9619 SIDNEY Address: PENSACOLA, FL 32507 City-St-Zip: City-St-Zip: PENSACOLA, FL 32507 Title: () Delete Title: (X) Change () Addition BOWEN, DAIEL E BOWEN, DANIEL E Name: Name: 800 S Address: Address: 800 S PENSACOLA, FL 32501 City-St-Zip: City-St-Zip: PENSACOLA, FL 32501 Title: () Delete Title: () Change () Addition MURRAY, MICHAEL J JR Name: Name: Address: 2630 BELLE CHRISTIANE CIR Address: PENSACOLA, FL 32503 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: M.J. MCCLUSKEY P 05/29/2004