

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

DOCUMENT# N00883

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** LA CHATEAU CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2813 LANGLEY AVENUE  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

4400 BAYOU BLVD  
STE 35  
PENSACOLA, FL 32503 US

**New Mailing Address:**

**FEI Number:** 59-2698889      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LONGWELL, TINA  
CENTRE GROUP PROPERTIES, INC  
4400 BAYOU BLVD STE 35  
PENSACOLA, FL 32503 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: STD  
Name: MALIN, JANE  
Address: 2813 LANGLEY AVE # 115  
City-St-Zip: PENSACOLA, FL 32504

Title: PD  
Name: JEAN, WHITE  
Address: 2813 LANGLEY AVE. #109  
City-St-Zip: PENSACOLA, FL 32504

Title: VD  
Name: FOSTER, CORNELIA  
Address: 2813 LANGLEY AVE. #107  
City-St-Zip: PENSACOLA, FL 32504

Title: D  
Name: CANNAVA, HELEN  
Address: 2813 LANGLEY AVE #118  
City-St-Zip: PENSACOLA, FL 32504

Title: D  
Name: CACCIVIO, CHARLOTTE  
Address: 4302 WHITELEAF CIRCLE  
City-St-Zip: PENSACOLA, FL 32504

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: JEAN WHITE

DP

04/01/2010

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

\_\_\_\_\_  
Date