2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005482

FILED Jan 15, 2009 Secretary of State

Entity Name: PERDIDO BAY COUNTRY CLUB ESTATES CONSERVATION ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 4400 MOBILE HWY PENSACOLA, FL 32506 **Current Mailing Address: New Mailing Address:** 433 E. GOVERNMENT STREET PENSACOLA, FL 32502 FEI Number: 03-0435089 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: MINSHEW, LISA S 433 EAST GOVERNMENT STREET PENSACOLA, FL 32502 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GRAF, ALBERT C Name: Name: Address: 4400 MOBILE HWY Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MABIE, MARRIAN Name: Address: 4400 MOBILE HWY Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: () Delete Title: () Change () Addition MINSHEW, LISA Name: Name: 433 E. GOVERNMENT STREET Address: Address: City-St-Zip: PENSACOLA, FL 32502 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: LISA MINSHEW D 01/15/2009