

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2006 8:00 am**  
**Secretary of State**

03-29-2006 90121 030 \*\*\*\*70.00

DOCUMENT # N01000007412

1. Entity Name  
EASTSIDE NEIGHBORHOOD IMPROVEMENT  
ASSOCIATION, INC.



Principal Place of Business  
1008 N 6TH AVENUE  
PENSACOLA, FL 32501

Mailing Address  
1008 N 6TH AVENUE  
PENSACOLA, FL 32501

40041395



2. Principal Place of Business  
601 E. MORENO ST.

3. Mailing Address  
601 E. MORENO ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012006 Chg-NP CR2E037 (11/05)

City & State  
PENSACOLA, FL.

City & State  
PENSACOLA, FL 32503

4. FEI Number  
59-3614158

Applied For  
Not Applicable

Zip  
32503

Country  
ESCAMBIA

Zip  
32503

Country  
ESCAMBIA

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RICHARDSON, TRACY  
1008 N 6TH AVENUE  
PENSACOLA, FL 32501

Name JEANNIE A. RHODEN

Street Address (P.O. Box Number is Not Acceptable)

601 E. MORENO ST.

City PENSACOLA, FL 32503

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Jeannie Rhoden/President*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP  
NAME RICHARDSON, TRACY ☒ Delete  
STREET ADDRESS 1008 N 6TH AVENUE  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE DP ☒ Change ☐ Addition  
NAME JEANNIE RHODEN  
STREET ADDRESS 601 E. Moreno St. 32503  
CITY-ST-ZIP Pensacola, FL

TITLE DV ☒ Delete  
NAME REAVES, CATHERINE  
STREET ADDRESS 1218 N 7TH AVENUE  
CITY-ST-ZIP PENSACOLA, FL 32503

TITLE DV ☒ Change ☐ Addition  
NAME Clinton Powell  
STREET ADDRESS 2507 N. MLK Jr. Dr. Zip: 32503  
CITY-ST-ZIP Pensacola, FL

TITLE PTD ☒ Delete  
NAME RICHARDSON, TRACY  
STREET ADDRESS 1008 N 6TH AVENUE  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE D= ☒ Change ☐ Addition  
NAME Financial Secretary  
STREET ADDRESS 1403 E. Hatton St.  
CITY-ST-ZIP Pensacola, FL 32503

TITLE DS ☒ Delete  
NAME RHODEN, JEANNIE  
STREET ADDRESS 601 W MORENO ST  
CITY-ST-ZIP PENSACOLA, FL 32503

TITLE D= ☒ Change ☐ Addition  
NAME Recording Secretary  
STREET ADDRESS Jeannie Rhoden  
CITY-ST-ZIP 601 E. Moreno St Zip: 32503  
Pensacola, FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D= ☒ Change ☐ Addition  
NAME Asst. Secretary  
STREET ADDRESS Tonya Ellis  
CITY-ST-ZIP 521 E. Fisher St.

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP Pensacola, FL 32503  
(see attached sheet)

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jeannie Rhoden/President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-06 (850) 937-3388

Date

Daytime Phone #

# ATTACHMENT

40041395  
# NO 1000007412

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	D=Treasurer		
NAME	Gloria Kyle		
STREET ADDRESS	600 E. Lee St.		
CITY-ST-ZIP	Pensacola, FL: 32503		
TITLE	D=Chaplin	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	Clinton Powell		
STREET ADDRESS	2507 N. MLK Jr. Dr.		
CITY-ST-ZIP	Pensacola, FL. 32503	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

I further certify that the information  
by signature shall have the same legal effect as if made under oath; that I am an officer or director  
as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if