2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000703

FILED Jan 06, 2009 Secretary of State

Entity Name: BAYOU TARKILN PLANTATION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3292 PITCHER PLANT CIR PENSACOLA, FL 32506 **Current Mailing Address: New Mailing Address:** 3292 PITCHER PLANT CIR PENSACOLA, FL 32506 US FEI Number: 59-3723550 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: DAUGHTRY, JOY 3292 PITCHER PLANT CIR PENSACOLA, FL 32506 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: () Delete (X) Change () Addition MORRIS, STAN JOHNSON, WILLIAM Name: Name: 3374 PITCHER PLANT CIR Address: 3313 PITCHER PLANT CIR Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: PENSACOLA, FL 32506 Title: Title: (X) Change () Addition () Delete MORRIS, STAN Name: MOORE, WILLIAM Name: Address: 3374 PITCHER PLANT CIR Address: 3350 PITCHER PLANT CIR City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: PENSACOLA, FL 32506 Title: () Delete Title: () Change () Addition CONLEY, LORI Name: Name: Address: 3267 PITCHER PLANT CIR Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: () Delete Title: Title: () Change () Addition DAUGHTRY, JOY Name: Name: 3292 PITCHER PLANT CIR Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: (X) Delete Title: () Change () Addition YORK, BOBBY Name: Name: 3410 PITCHER PLANT CIR Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: (X) Delete Title: () Change () Addition JOHNSON, BILL Name: Name: Address: 3313 PITCHER PLANT CIR Address: PENSACOLA, FL 32506 City-St-Zip: 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: JOY DAUGHTRY T 01/06/2009