

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009098

FILED
Jul 09, 2004
Secretary of State**Entity Name:** W.E. COMBS NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**209 BURNETTE AVENUE NW
FORT WALTON BEACH, FL 32548**New Principal Place of Business:****Current Mailing Address:**209 BURNETTE AVENUE NW
FORT WALTON BEACH, FL 32548**New Mailing Address:****FEI Number:** 36-4515122 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HENRY, SHARONA
209 BURNETTE AVENUE NW
FORT WALTON BEACH, FL 32548 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:** TREA () Delete
Name: ROBINSON, RUFUS
Address: 209 BURNETTE AVE. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** DIR () Delete
Name: BRYANT, JAMES
Address: 216 COMBS MANOR CT. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** DIR () Delete
Name: ROBINSON, TONYA
Address: 209 COMBS MANOR CT. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** PRES () Delete
Name: HENRY, SHARONA
Address: 209 BURNETTE AVE. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** VICE () Delete
Name: RICHARDSON, HELEN
Address: 730 BUTLER RD NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** SECT () Delete
Name: BRYANT, MARY
Address: 216 COMBS MANOR COURT NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TREA (X) Change () Addition
Name: BRYANT, JAMES
Address: 216 COMBS MANOR CT. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** DIR (X) Change () Addition
Name: SHEFFIELD, ANNIE
Address: 224 BURNETTE AVENUE NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VICE (X) Change () Addition
Name: HENRY, FRITZ
Address: 209 BURNETTE AVE. NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US**Title:** () Change () Addition
Name:
Address:
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: SHARONA HENRY

PRES

07/09/2004

Electronic Signature of Signing Officer or Director

Date