

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009780

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** JOE EDMISTEN EXPERIMENTAL PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

111-A SOUTH DEVILLIERS STREET  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

105-A SOUTH DEVILLIERS STREET  
PENSACOLA, FL 32502 US

**Current Mailing Address:**

111-A SOUTH DEVILLIERS STREET  
PENSACOLA, FL 32502 US

**New Mailing Address:**

**FEI Number:** 03-0512367      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SHELL, STEPHEN B  
226 PALAFOX PLACE  
SEVILLE TOWER, 9TH FLOOR  
PENSACOLA, FL 32501 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: D  
Name: EDMISTEN, JOE A  
Address: 111-A SOUTH DEVILLIERS STREET  
City-St-Zip: PENSACOLA, FL 32502 US

Title: D  
Name: O'TOOLE, SEAN  
Address: 111-A SOUTH DEVILLIERS STREET  
City-St-Zip: PENSACOLA, FL 32502 US

Title: D  
Name: MILEY, GLEN A  
Address: 111-A SOUTH DEVILLIERS STREET  
City-St-Zip: PENSACOLA, FL 32502 US

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: JOE EDMISTEN

MGR

02/18/2011

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

\_\_\_\_\_  
Date