

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02557

FILED
Sep 24, 2009
Secretary of State

Entity Name: THE WOODLANDS CONDOMINIUM ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

9560 SUNNEHANNA BLVD. UNIT#B103
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

9560 SUNNEHANNA BLVD.
B103
PENSACOLA, FL 32514 US

New Mailing Address:

FEI Number: 59-2494170 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROSS, CAROLYN
9560 SUNNEHANNA BLVD B103
PENSACOLA, FL 32514 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: VSD () Delete
Name: TINKER, MICHAEL
Address: 9560 SUNNEHANNA BLVD.
City-St-Zip: PENSACOLA, FL 32514

Title: ASD () Delete
Name: FONSECA, JOAN
Address: 9560 SUNNEHANNA BLVD, C104
City-St-Zip: PENSACOLA, FL 32514

Title: PTD () Delete
Name: ROSS, CAROLYN
Address: 9560 SUNNEHANNA BLVD B103
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: WHITE, D. A
Address: 9560 SUNNEHANNA BLVD., B204
City-St-Zip: PENSACOLA, FL 32514

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CAROLYN ROSS

DIR

09/24/2009

Electronic Signature of Signing Officer or Director

Date