

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90021 037 ****61.25

DOCUMENT # N03000003637

1. Entity Name
ROSAFLORA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**6446 SCENIC HIGHWAY
PENSACOLA, FL 32504**

Mailing Address
**6436 SCENIC HIGHWAY
PENSACOLA, FL 32504**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-2151696

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREEN, DOLORES P
6436 SCENIC HIGHWAY
PENSACOLA, FL 32504**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

TITLE P ☐ Delete
NAME MCGOVERN, JOAN
STREET ADDRESS 6446 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE VD ☒ Delete
NAME MCGOVERN, JAMES
STREET ADDRESS 6446 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE S ☐ Delete
NAME DOLL, SANDRA
STREET ADDRESS 6438 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE T ☐ Delete
NAME GREEN, DOLORES
STREET ADDRESS 6436 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE D ☒ Delete
NAME DOLL, RICHARD
STREET ADDRESS 6438 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE D ☒ Delete
NAME TURNER, SALLY
STREET ADDRESS 6442 SCENIC HIGHWAY
CITY-ST-ZIP PENSACOLA, FL 32504

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition
NAME **DOLL, RICHARD**
STREET ADDRESS **6438 SCENIC HWY**
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-30-06 475-0633
850