

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006163

FILED
Feb 02, 2009
Secretary of State

Entity Name: GREATER SYLVANIA HEIGHTS FRONT PORCH, INC.

Current Principal Place of Business:

303 LOVEJOY ROAD
B
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

303 LOVEJOY ROAD
B
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 43-1967361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, ROBERT H
4629 WINDSTARR DR.
DESTIN, FL 32541 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: C () Delete
Name: GRAY, ROBERT
Address: 303 LOVEJOY ROAD, A
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VC () Delete
Name: SMITH, LUTHER
Address: 303 LOVEJOY ROAD, A
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: T () Delete
Name: CRAWFORD, H. ROBERT
Address: 303 LOVEJOY ROAD, A
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: S (X) Delete
Name: SPELLER, CONNIE
Address: 303 LOVEJOY ROAD, A
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D (X) Delete
Name: PAYTON, LISA
Address: 303 LOVEJOY ROAD, A
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: H ROBERT CRAWFORD

TREA

02/02/2009

Electronic Signature of Signing Officer or Director

Date