2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N04000008251

Entity Name: NATURE TRAIL CONSERVANCY, INC.

Current Principal Place of Business:

17 WEST CEDAR STREET
SUITE 3
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 12725
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 20-1590109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOOKMAN, ALAN B
30 S SPRING STREET
PENSACOLA, FL 325025612 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	( ) Delete
Name:	NASH, NEAL	
Address:	120 E MAIN STREET SUITE A	
City-St-Zip:	PENSACOLA, FL 32502	
Title:	D	( ) Delete
Name:	ADAMS JR, LARRY	
Address:	8689 FOXTAIL LOOP	
City-St-Zip:	PENSACOLA, FL 32502	
Title:	D	( ) Delete
Name:	NICKELSEN, ERIC J	
Address:	17 WEST CEDAR STREET SUITE 3	
City-St-Zip:	PENSACOLA, FL 32502	
Title:	DT	( ) Delete
Name:	TAMERY JR, ANTHONY	
Address:	120 E MAIN STREET SUITE A	
City-St-Zip:	PENSACOLA, FL 32502	
Title:	PRES	( ) Delete
Name:	TAYLOR, DAVID B JR.	
Address:	120 EAST MAIN STREET, SUITE A	
City-St-Zip:	PENSACOLA,, FL 32502	
Title:	VP	( ) Delete
Name:	JENNINGS, SCOTT A	
Address:	17 WEST CEDAR STREET, SUITE 1	
City-St-Zip:	PENSACOLA, FL 32502	

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:	
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: DAVID TAYLOR, JR. PRES 04/24/2009
Electronic Signature of Signing Officer or Director — Date