

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010207

FILED  
Mar 25, 2011  
Secretary of State

**Entity Name:** SNUG HARBOUR CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10335 GULF BEACH HWY  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 34200  
PENSACOLA, FL 32507

**New Mailing Address:**

**FEI Number:** 27-5465700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEPHENSON, SAMUEL B  
13753 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507 US

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

VAN ARSDALE, CYNTHIA L  
13753 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507 US

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: CINDY VAN ARSDALE

03/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SLUDER, GARY  
Address: 2791 WELLER AVE.  
City-St-Zip: PENSACOLA, FL 32507

Title: VD  
Name: KAISER, LAWRENCE  
Address: 1108 HAYLARD PL.  
City-St-Zip: PENSACOLA, FL 32507

Title: SD  
Name: RENFROW, SEAN  
Address: 10335 GULF BEACH HWY # 506  
City-St-Zip: PENSACOLA, FL 32507

Title: TD  
Name: KENT, GLENN  
Address: 14351 HWY. 959  
City-St-Zip: CLINTON, LA 70722

Title: D  
Name: GRUBBS, LEWIS  
Address: 2055 SHEFFIELD DR.  
City-St-Zip: JACKSON, MS 39211

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: GARY SLUDER

PD

03/25/2011

Electronic Signature of Signing Officer or Director

Date