## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N05000000365

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Entity Name: HARBOUR POINTE OF PERDIDO KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5006 CHOCTAW AVENUE 154 ETHEL WINGATE DRIVE PENSACOLA, FL 32507 PENSACOLA, FL 32507

Current Mailing Address: New Mailing Address:

PO BOX 34200

PENSACOLA, FL 32507

FEI Number: 20-5682418 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STEPHENSON, SAMUEL B
5006 CHOCTAW AVE
PENSACOLA, FL 32507 US
STEPHENSON, SAMUEL B
13753 PERDIDO KEY DRIVE
PENSACOLA, FL 32507 US
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: SAMUEL B STEPHENSON 04/10/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name:ADAMS, LARRYName:LAMBERT, CLELLAddress:2010 AVALON PARKWAY, SUITE 400Address:103 PENNISULA DRIVE

City-St-Zip: MCDONOUGH, GA 30253 City-St-Zip: PEACHTREE CITY, GA 30269

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition Name: FERMAN, DANIEL Name: WHITE, MICHAEL Address: 39 WOODLAKE DRIVE Address: 211 SMOKERISE TRACE

City-St-Zip: NEWMAN, GA 30265 City-St-Zip: PEACHTREE CITY, GA 30269

Title: STD () Delete Title: D (X) Change () Addition

Title: STD ( ) Delete Title: D (X) Change ( ) Addition
Name: BEARD, W. L

Address: 107 PEEU SS POAD

Address: 107 PEEPLES ROAD

City-St-Zip: FAYETTEVILLE, GA 30215

Address: 107 PEEPLES ROAD

City-St-Zip: FAYETTEVILLE, GA 30215

Title: D ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 JONES, FRED
 Name:
 JONES, FRED

 Address:
 PO BOX 2467
 Address:
 PO BOX 2467

City-St-Zip: PEACHTREE CITY, GA 30269 City-St-Zip: PEACHTREE CITY, GA 30269

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CONNER, AL
 Name:
 GILL, KONRAD

 Address:
 551 WOODFERN COURT
 Address:
 4033 LANDFALL DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:
 PENSACOLA, FL 32507

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: CLELL LAMBERT PD 04/10/2009