

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003395

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** COTTONWOOD SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4883 GLOVER LANE  
MILTON, FL 32570

**New Principal Place of Business:**

4400 BAYOU BLVD STE 58  
PENSACOLA, FL 32503

**Current Mailing Address:**

REALTY MASTERS OF FLOOR  
1719 N. 9TH AVE  
PENSACOLA, FL 32503

**New Mailing Address:**

REALTY MASTERS OF FLOOR  
4400 BAYOU BLVD STE 58  
PENSACOLA, FL 32503

**FEI Number:** 33-1138700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REALTY MASTERS OF FL  
1719 N. 9TH AVE  
PENSACOLA, FL 32503 US

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

REALTY MASTERS OF FL  
4400 BAYOU BLVD STE 58  
PENSACOLA, FL 32503 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: PAMELA A KEEN

03/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MILLER, JEFF  
Address: 1719 N 9TH AVE.  
City-St-Zip: PENSACOLA, FL 32503

Title: DVST ( ) Delete  
Name: ROLLO, STEVEN B  
Address: 4883 GLOVER LANE  
City-St-Zip: MILTON, FL 32570

Title: T ( ) Delete  
Name: KING, DIANA  
Address: 1719 N. 9TH AVE.  
City-St-Zip: PENSACOLA, FL 32503

Title: VP (X) Delete  
Name: HALSTON, MIKE  
Address: 1719 N 9TH AVE  
City-St-Zip: PENSACOLA, FL 32503

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MILLER, JEFF  
Address: 6032 PAIGE POINTE DR  
City-St-Zip: MILTON, FL 32570

Title: VP (X) Change ( ) Addition  
Name: HALSTON, MIKE  
Address: 6190 GREY MOSS BLVD  
City-St-Zip: MILTON, FL 32570

Title: S (X) Change ( ) Addition  
Name: KING, DIANNA  
Address: 6057 PAIGE POINTE DR  
City-St-Zip: MILTON, FL 32570

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: JEFF MILLER

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date