

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012017

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: FLORENCIA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

14900 RIVER ROAD  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 34009  
PENSACOLA, FL 32507

**New Mailing Address:**

FEI Number: 20-3840961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS, LES  
14900 RIVER ROAD  
PENSACOLA, FL 32507 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: BRELAND, CHARLES K JR  
Address: 14900 RIVER ROAD  
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete  
Name: VICE, THOMAS E  
Address: PO BOX 9120  
City-St-Zip: COLUMBUS, MS 39705

Title: D ( ) Delete  
Name: TRICE, LARRY  
Address: 6301 MONROE STREET  
City-St-Zip: DAPHNE, AL 36256

Title: D ( ) Delete  
Name: HUDGENS, DAVID  
Address: 9877 PLEASANT RD  
City-St-Zip: DAPHNE, AL 36526

Title: D ( ) Delete  
Name: DOMENICK, ANDREANA  
Address: 9907 LAUREL KNOLL LANE  
City-St-Zip: GERMANTOWN, TN 38139

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

Title: VP (X) Change ( ) Addition  
Name: HOYLE, JON  
Address: 1920 REDWOOD GROVE TER  
City-St-Zip: LAKE MARY, FL 32746

Title: P (X) Change ( ) Addition  
Name: VICE, THOMAS E  
Address: PO BOX 9120  
City-St-Zip: COLUMBUS, MS 39705

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

Title: D (X) Change ( ) Addition  
Name: SHEARER, BOB  
Address: 4645 NORTH HAMPTON DR  
City-St-Zip: JACKSON, MS 39211

Title: S/T (X) Change ( ) Addition  
Name: DOMENICK, ANDREANA  
Address: 9907 LAUREL KNOLL LANE  
City-St-Zip: GERMANTOWN, TN 38139

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: THOMAS VICE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date