

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 26, 2007
Secretary of State

DOCUMENT# N06000001991

Entity Name: FLORIDIAN HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**CENTRE GROUP PROPERTIES, INC
4400 BAYOU BLVD #35
PENSACOLA, FL 32503**New Principal Place of Business:**5158 COCOA DR.
PENSACOLA, FL 32526**Current Mailing Address:**CENTRE GROUP PROPERTIES, INC
4400 BAYOU BLVD #35
PENSACOLA, FL 32503**New Mailing Address:**5158 COCOA DR.
PENSACOLA, FL 32526**FEI Number:** 20-5432371**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BLANKENSHIP, SUZANNE
25 WEST GOVERNMENT STREET
PENSACOLA, FL 32502 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: DP () Delete
Name: MORRIS, GAIL
Address: 5508-B N
City-St-Zip: PENSACOLA, FL 32515Title: DVP () Delete
Name: BARNES, DAVID
Address: 5508-B N
City-St-Zip: PENSACOLA, FL 32505Title: DST () Delete
Name: HOWLE, JANINE
Address: 5508-B N
City-St-Zip: PENSACOLA, FL 32505Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DP (X) Change () Addition
Name: LEFTWICH, PAT
Address: 6474 SARASOTA STREET
City-St-Zip: PENSACOLA, FL 32526Title: DVP (X) Change () Addition
Name: PINKSTON, RONNIE
Address: 5009 PORT ST. JOE
City-St-Zip: PENSACOLA, FL 32526Title: DT (X) Change () Addition
Name: TAYLOR, THOMAS A
Address: 5158 COCOA DR.
City-St-Zip: PENSACOLA, FL 32526Title: DS () Change (X) Addition
Name: PETERS, JOCELYN
Address: 6512 TAMPA DR.
City-St-Zip: PENSACOLA, FL 32526Title: DMAL () Change (X) Addition
Name: BEER, TERESA
Address: 6468 SARASOTA ST.
City-St-Zip: PENSACOLA, FL 32526

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 A. TAYLOR

DT

11/26/2007

Electronic Signature of Signing Officer or Director

Date