

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005616

FILED  
Mar 16, 2010  
Secretary of State

**Entity Name:** SCENIC HEIGHTS NEIGHBORHOOD, INC.

**Current Principal Place of Business:**

1824 MEDART DRIVE  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

1824 MEDART DRIVE  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 20-4986955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PUGH, JOYCE  
1824 MEDART DRIVE  
TALLAHASSEE, FL 32303 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: O  
Name: LARSEN, LINDA  
Address: 1820 DEVRA DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: O  
Name: WIGGINS, LUM G  
Address: 1823 DEVRA DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D  
Name: POINTINGER, PAT  
Address: 1841 DEVRA DR.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: O  
Name: ELLIS, SUSIE  
Address: 1822 DEVRA DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: O  
Name: PUGH, JOYCE  
Address: 1824 MEDART DR  
City-St-Zip: TALLAHASSEE, FL 32303

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: JOYCE PUGH

TREA

03/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date