2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005984

FILED Apr 22, 2009 Secretary of State

Entity Name: HOLSBERRY ESTATES HOMEOWNER'S ASSOCIATION, INC.

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

908 GARDENGATE CIRCLE PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

908 GARDENGATE CIRCLE PENSACOLA, FL 32504

FEI Number: 26-2405276 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:

ETHERIDGE, RAY D
908 GARDEN GATE CIRCLE
PENSACOLA, FL 32504 US
ETHERIDGE, RAY O
908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 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: RAY O. ETHERIDGE 04/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BURIE, ED
 Name:
 BURIE, ED

 Address:
 654 SALETA ST.
 Address:
 648 SALETA STREET

 City-St-Zip:
 PENSACOLA, FL 32534
 City-St-Zip:
 PENSACOLA, FL 32534

Title: VP () Delete Title: VPD (X) Change () Addition Name: HEATHER, STOUT Name: JONES, DANIEL

 Name:
 HEATHER, STOUT
 Name:
 JONES, DANIEL

 Address:
 626 SALETA ST.
 Address:
 604 SALETA STREET

 City-St-Zip:
 PENSACOLA, FL 32534
 City-St-Zip:
 PENSACOLA, FL 32534

Title: S () Delete Title: SD (X) Change () Addition

 Name:
 DAVIDSON, GEOMETTE
 Name:
 DAVIDSON, JEANETTE

 Address:
 638 SALETA ST.
 Address:
 638 SALETA STREET

 City-St-Zip:
 PENSACOLA, FL 32534
 City-St-Zip:
 PENSACOLA, FL 32534

 Name:
 NEWTON, MELANIE
 Name:
 NEWTON, MELANIE

 Address:
 634 SALETA ST.
 Address:
 634 SALETA STREET

 City-St-Zip:
 PENSACOLA, FL 32534
 City-St-Zip:
 PENSACOLA, FL 32534

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

 Name:
 Name:
 STOUT, HEATHER

 Address:
 Address:
 626 SALETA STREET

 City-St-Zip:
 City-St-Zip:
 PENSACOLA, FL 32534

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: RAY O. ETHERIDGE RA 04/22/2009