

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009302

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** ALCANIZ CENTRE MASTER HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21 S. TARRAGONA ST.  
103  
PENSACOLA, FL 32502

**New Principal Place of Business:**

**Current Mailing Address:**

21 S. TARRAGONA ST.  
103  
PENSACOLA, FL 32502

**New Mailing Address:**

**FEI Number:** 20-5465400

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZIMMERN, DANNY A  
SCOGGINS III C/O  
21 S. TARRAGONA ST.  
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:** DPT  
**Name:** LOVELL, W.ADRIAN  
**Address:** 21 S. TARRAGONA STREET, SUITE 102  
**City-St-Zip:** PENSACOLA, FL 32501

**Title:** DVS  
**Name:** CARSON, JOSEPH E  
**Address:** 21 S. TARRAGONA STREET, SUITE 102  
**City-St-Zip:** PENSACOLA, FL 32501

**Title:** D  
**Name:** LOVELL, VIRGINIA  
**Address:** 21 S. TARRAGONA STREET, SUITE 102  
**City-St-Zip:** PENSACOLA, FL 32501

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:** DANNY A. ZIMMERN

RA

04/26/2010

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

\_\_\_\_\_  
Date