2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006871

FILED May 09, 2008 Secretary of State

Entity Name: AZALFA COURT CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business: 362 GULF BREEZE PARKWAY, #111 GULF BREEZE, FL 32561		New Principal Place of Business: 913 GULF BREEZE PKWY SUITE 3 GULF BREEZE, FL 32561	
362 GULF BREEZE PARKWAY, #111 GULF BREEZE, FL 32561		908 GARDEN GATE CIRCLE PENSACOLA, FL 32504	
ln accorda	r: 26-0842172 FEI Number Applied For() FE nce with s. 607.193(2)(b), F.S., the corporation did not reco d Address of Current Registered Agent:		Certificate of Status Desired () of New Registered Agent:
MOORHE	EAD, STEPHEN R		
	GOVERNMENT STREET OLA, FL 32502 US		
PENSAC The abov	GOVERNMENT STREET	ose of changing its registere	ed office or registered agent, or both,
PENSAC The abov	GOVERNMENT STREET OLA, FL 32502 US e named entity submits this statement for the purpo te of Florida.	ose of changing its registere	ed office or registered agent, or both,
PENSAC The abov in the Sta	GOVERNMENT STREET OLA, FL 32502 US e named entity submits this statement for the purpo te of Florida.	ose of changing its registere	ed office or registered agent, or both, Date
PENSAC The abov in the Sta	GOVERNMENT STREET OLA, FL 32502 US e named entity submits this statement for the purpo te of Florida. JRE:		
PENSAC The abov in the Sta	e named entity submits this statement for the purporte of Florida. JRE: Electronic Signature of Registered Agent RS AND DIRECTORS: PD () Delete PABIAN, KRISTINE 362 GULF BREEZE PARKWAY, #111		Date
PENSAC The above in the State SIGNATL OFFICER Title: Name: Address:	e named entity submits this statement for the purporte of Florida. JRE: Electronic Signature of Registered Agent RS AND DIRECTORS: PD () Delete PABIAN, KRISTINE 362 GULF BREEZE PARKWAY, #111 GULF BREEZE, FL 32561 VPD () Delete RAYMON, BRUCE 362 GULF BREEZE PARKWAY, #111	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: KRISTINE PABIAN PD 05/09/2008