

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010513

FILED
Mar 10, 2009
Secretary of State

Entity Name: ESCAMBIA-SANTA ROSA REAL ESTATE COUNCIL, INC.

Current Principal Place of Business:

2590 N. 12TH AVENUE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

2590 N. 12TH AVENUE
PENSACOLA, FL 32503

New Mailing Address:

C/O BRIAN W. HOFFMAN
PO BOX 1831
PENSACOLA, FL 32591 US

FEI Number: 26-1376534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERRY ANNE SCHULTZ, ESQ.
2721 GULF BREEZE PKWY
GULF BREEZE, FL 32563 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: D () Delete
Name: SCHULTZ, KERRY ANNE
Address: 2590 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: FLOUNLACKER, PAUL
Address: 2590 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: HOFFMAN, BRIAN
Address: 2590 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: FOUNTAIN, KENNETH
Address: 2590 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HOFFMAN, BRIAN W
Address: 2590 N. 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRIAN W. HOFFMAN

D

03/10/2009

Electronic Signature of Signing Officer or Director

Date