

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004437

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** AUTUMN MEADOWS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 BAYOU BLVD., SUITE 35  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

4400 BAYOU BLVD.,  
PENSACOLA, FL 32503

**New Mailing Address:**

4400 BAYOU BLVD., SUITE 35  
PENSACOLA, FL 32503

**FEI Number:** 20-8232601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGWELL, TINA  
4400 BAYOU BLVD  
PENSACOLA, FL 32503 US

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

LONGWELL, TINA  
4400 BAYOU BLVD STE 35  
PENSACOLA, FL 32503 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:**

02/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MORRIS, GAIL  
Address: 5508-B NORTH W STREET  
City-St-Zip: PENSACOLA, FL 32505

Title: VPD  
Name: BARNES, DAVID  
Address: 5508-B NORTH W STREET  
City-St-Zip: PENSACOLA, FL 32505

Title: STD  
Name: MOORE, WILLIAM A  
Address: 5508-B NORTH W STREET  
City-St-Zip: PENSACOLA, FL 32505

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:** GAIL MORRIS

DP

02/16/2010

Electronic Signature of Signing Officer or Director

Date