## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000008613

FILED Jan 11, 2009 Secretary of State

Entity Name: BUILDING H AT RIVERWALK CONDOMINIUM ASSOCIATION OF PENSACOLA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 501 E BURGESS ROAD 501 E BURGESS ROAD, H-0 (OFFICE) PENSACOLA, FL 32504 PENSACOLA, FL 32504 **Current Mailing Address: New Mailing Address:** 403 PORT ROYAL WAY 501 E BURGESS ROAD, H-0 (OFFICE) PENSACOLA, FL 32502 PENSACOLA, FL 32504 FEI Number: 36-4640444 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: TEW, JEANNE H 403 PORT ROYAL WAY PENSACOLA, FL 32502 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Change (X) Addition () Delete ROSAS, MORGAN Name: Name: Address: Address: 1014 CORONADO DRIVE City-St-Zip: City-St-Zip: GULF BREEZE, FL 32563 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: CALVERT, THOTH Address: Address: 4771 BAYOU BOULEVARD, #321 City-St-Zip: City-St-Zip: PENSACOLA, FL 32503 US Title: () Delete Title: ( ) Change (X) Addition TEW, JEANNE H Name: Name: 403 PORT ROYAL WAY Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32502 US Title: () Delete Title: AST ( ) Change (X) Addition CARFF, ALICIA R Name: Name: 501 E BURGESS ROAD, UNIT H-8 Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32504 US Title: () Delete Title: ( ) Change (X) Addition DENNIS, GENE Name: Name: 512 SUN VALLEY DRIVE Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32505 US

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: JEANNE H TEW S 01/11/2009