

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09223

FILED
Feb 02, 2009
Secretary of State

Entity Name: LANDS END OF PERDIDO KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13335 JOHNSON BCH RD
13335 JOHNSON BEACH ROAD
PENSACOLA, FL 32507 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 34126
PENSACOLA, FL 32507 US

New Mailing Address:

FEI Number: 59-2542950 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, PA
348 MIRACLE STRIP PKWY SW, STE 7
FORT WALTON BEACH, FL 32548 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: S () Delete
Name: FARREN, RENEE
Address: 5218 EDMONDSON
City-St-Zip: DALLAS, TX 75209

Title: T () Delete
Name: GONSOULIN, JERRY
Address: PO BOX 3714
City-St-Zip: HOUMA, LA 70361

Title: P () Delete
Name: EDDY, CHRIS
Address: 10110 PECUE LN
City-St-Zip: BATON ROUGE, LA 70810

Title: S () Delete
Name: BAKER, RYAN
Address: 2300 ARABIAN RD.
City-St-Zip: COLUMBIANA, AL 35051

Title: VP () Delete
Name: BOISFUNTAINE, CURT
Address: 3900 NORMANDY AVE
City-St-Zip: DALLAS, TX 75205

Title: D () Delete
Name: SINGLETARY, BRENDA
Address: 13335 JOHNSON BENCH RD
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: MANA (X) Change () Addition
Name: SINGLETARY, BRENDA
Address: 13335 JOHNSON BENCH RD
City-St-Zip: PENSACOLA, FL 32507

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: BRENDA SINGLETARY

Electronic Signature of Signing Officer or Director

MANA

02/02/2009

Date