

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000006828

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** RESTORE NORTH FLORIDA, INC.

**Current Principal Place of Business:**

1701 BRIZA DEL MAR  
NAVARRE, FL 32566

**New Principal Place of Business:**

**Current Mailing Address:**

1701 BRIZA DEL MAR  
NAVARRE, FL 32566

**New Mailing Address:**

**FEI Number:** 27-3103337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DYE, ALBERT R JR.  
1701 BRIZA DEL MAR  
NAVARRE, FL 32566 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:** P  
**Name:** HAMATI, JOHN A  
**Address:** 158 MARLIN CIRCLE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408

**Title:** S, T  
**Name:** PRATT, WILLIAM E  
**Address:** 840 BLUE MOUNTAIN ROAD  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

**Title:** VP  
**Name:** JACOBS, ANTHONY R  
**Address:** 47 BAYSHORE DR  
**City-St-Zip:** PENSACOLA, FL 32407

**Title:** EX D  
**Name:** DYE, ALBERT R JR  
**Address:** 1701 BRIZA DEL MAR  
**City-St-Zip:** NAVARRE, FL 32566

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:** ALBERT R. DYE, JR.

EX D

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date