

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004705

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** THE MOORINGS RESIDENT ASSOCIATION, INC.

**Current Principal Place of Business:**

8491 OLD SPANISH TRAIL RD  
145-R  
PENSACOLA, FL 32514

**New Principal Place of Business:**

8491 OLD SPANISH TRAIL RD  
PENSACOLA, FL 32514

**Current Mailing Address:**

8491 OLD SPANISH TRAIL RD  
145-R  
PENSACOLA, FL 32514

**New Mailing Address:**

8491 OLD SPANISH TRAIL RD  
PENSACOLA, FL 32514

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

FRANKLIN, ANNA L  
8491 OLD SPANISH TRAIL  
145-R  
PENSACOLA, FL 32514 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: FRANKLIN, ANNA L  
Address: 8491 OLD SPANISH TRAIL APT 145-R  
City-St-Zip: PENSACOLA, FL 32514 US

Title: VP  
Name: BEATY, TONYA  
Address: 8491 OLD SPANISH TRAIL APT 114-K  
City-St-Zip: PENSACOLA, FL 32514 US

Title: S,T  
Name: ANDERSON, BURNETT  
Address: 8491 OLD SPANISH TRAIL APT 60-E  
City-St-Zip: PENSACOLA, FL 32514 US

Title: D  
Name: HILSON, PAT  
Address: 8491 OLD SPANISH TRAIL APT 53-E  
City-St-Zip: PENSACOLA, FL 32514 US

Title: D  
Name: WILLIAMS, LORIE  
Address: 8491 OLD SPANISH TRAIL APT 74-G  
City-St-Zip: PENSACOLA, FL 32514 US

Title: D  
Name: LETT, AUKISHA  
Address: 8491 OLD SPANISH TRAIL APT 200-V  
City-St-Zip: PENSACOLA, FL 32514 US

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: TONYA BEATY

VP

03/20/2012

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

\_\_\_\_\_  
Date