


FILE NOW: FILING FEE IS \$61.25

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May 05 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N17294 (2)**

1. Corporation Name  
**PINE WOODS HOMEOWNERS' ASSOCIATION OF PENSACOLA, INC.**



Principal Place of Business <b>705 PINEY LN. P.O. BOX 994 CANTONMENT FL 32533</b>	Mailing Address <b>705 PINEY LN. P.O. BOX 994 CANTONMENT FL 32533</b>
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3. Date incorporated or Qualified <b>10/13/1986</b>	
4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>801 Piney Lane</b> Suite, Apt. #, etc. 22 <b>P.O. Box 994</b> City & State 23 <b>Cantonment FL</b> Zip 24 <b>32533</b> Country	2a. Mailing Address 26 <b>801 Piney Lane</b> Suite, Apt. #, etc. 27 <b>P.O. Box 994</b> City & State 28 <b>Cantonment FL</b> Zip 29 <b>32533</b> Country
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9. Name and Address of Current Registered Agent

**CROSBY, LARRY  
705 PINEY LANE  
CANTONMENT FL 32533**

10. Name and Address of New Registered Agent

81 Name <b>Ken Albritton</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>801 Piney Lane</b>	
83	
84 City <b>Cantonment FL</b>	85 Zip Code <b>32533</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: **Ken Albritton President 4-13-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	<b>CROSBY, LARRY</b> 705 PINEY LANE CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	
TITLE <b>DP</b>	<b>MORRIS, MILES</b> 810 PINEY LANE CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>DP</b> 1.2 NAME <b>Ken Albritton</b> 1.3 STREET ADDRESS <b>801 Piney Lane</b> 1.4 CITY-ST-ZIP <b>Cantonment, FL 32533</b>
TITLE <b>ST</b>	<b>PAM LITTLEJOHN</b> 831 PINEY LANE CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>DV</b> 2.2 NAME <b>Paul Lewis</b> 2.3 STREET ADDRESS <b>790 Piney Lane</b> 2.4 CITY-ST-ZIP <b>Cantonment FL 32533</b>
TITLE <b>DV</b>	<b>GILLIAM, TOM</b> 751 PINEY LANE CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>ST</b> 3.2 NAME <b>Paul Jones</b> 3.3 STREET ADDRESS <b>810 Hwy 97 S.</b> 3.4 CITY-ST-ZIP <b>Cantonment, FL 32533</b>
TITLE <b>D</b>	<b>SELF, JIMMIE</b> 820 PINEY LN. CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<b>ROBERTSON, JIM</b> 741 PINEY LANE CANTONMENT FL	<input checked="" type="checkbox"/> DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
			6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Ken Albritton 4-13-98**

CFR2E037 (10/97)