## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20829

FILED Apr 22, 2009 Secretary of State

Entity Name: PENSACOLA STREET NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 4957 25 CENTRAL SQUARE

SANTA ROSA BEACH, FL 32459 H-2

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

P.O. BOX 4957 P.O. BOX 4957

SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-2896346 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:

NEWMAN, RAYMOND F JR. 348 MIRACLE STRIP PARKWAY SW PARADISE VILLAGE SUITE 7 FORT WALTON BEACH, FL 32548 US

**OFFICERS AND DIRECTORS:** 

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

## Electronic eightene of Registered

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 MCCOMB, MIKE
 Name:
 MESTRE, JOSE

 Address:
 2522 SYCAMORE HILLS DRIVE
 Address:
 4830 OLD LEEDS ROAD

Address: 2522 SYCAMORE HILLS DRIVE Address: 4830 OLD LEEDS ROAD City-St-Zip: FORT WAYNE, IN 46814 City-St-Zip: BIRMINGHAM, AL 35213 US

Title: VD ( ) Delete Title: VPD (X) Change ( ) Addition Name: MESTRE, DEBRA Name: ELSAS, ELLEN

Address: 4830 OLD LEEDS ROAD Address: 3408 BETHUNE DRIVE
City-St-Zip: BIRMINGHAM, AL 35213 City-St-Zip: BIRMINGHAM, AL 35223 US

 $\label{eq:title:definition} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf TD} \qquad ({\sf X}) \ {\sf Change} \ (\ ) \ {\sf Addition}$ 

 Name:
 SARROW, RICHARD
 Name:
 BARNES, ALAN

 Address:
 1000 BOURBON ST. PMB 321
 Address:
 366 STABLES COURT

City-St-Zip: NEW ORLEANS, LA 70116 City-St-Zip: SANDY SPRINGS, GA 30350 US

 $\label{eq:title:Title:SD} \textit{Title:} \qquad \textit{SD} \qquad \textit{(X) Change () Addition}$ 

Name: BARNES, ALAN Name: CIRINCIONE, JANICE

Address: 662 VININGS ESTATE DRIVE Address: 19815 SPRING CREEK ROAD City-St-Zip: MABLETON, GA 30126 City-St-Zip: HAGERSTOWN, MD 30126 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: JOSE MESTRE PD 04/22/2009