

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26470

FILED
Feb 23, 2009
Secretary of State

Entity Name: BRITTANY FORGE HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

4107 BRITTANY PLACE
PENSACOLA, FL 325044948 US

New Principal Place of Business:

Current Mailing Address:

4107 BRITTANY PLACE
PENSACOLA, FL 325044948 US

New Mailing Address:

FEI Number: 59-2889946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHEL, LUCY A
4107 BRITTANY PLACE
PENSACOLA, FL 325044948 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: D () Delete
Name: HOFFMAN, MISSY
Address: 3105 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: T () Delete
Name: MICHEL, LUCY
Address: 4107 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: P () Delete
Name: ELSTEN, GARY
Address: 4102 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: COPELAND, JOANNE
Address: 3109 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: S () Delete
Name: LEIGHTON, KIM
Address: 3119 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: DOYLE, JENNIFER
Address: 3113 BRITTANY TERRACE
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PERCIBALLI, BRENDA
Address: 3102 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

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

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

Title: VP (X) Change () Addition
Name: CAVALIER, WENDELL
Address: 3115 BRITTANY TERRACE
City-St-Zip: PENSACOLA, FL 32504

Title: S (X) Change () Addition
Name: DONAHUE, BEVERLY
Address: 3111 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

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

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: LUCY A. MICHEL

T

02/23/2009

Electronic Signature of Signing Officer or Director

Date