

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34201

FILED
Feb 28, 2009
Secretary of State

Entity Name: GREATER PENSACOLA AREA ANTIQUE DEALERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

8508 PUNTA LORA
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

8508 PUNTA LORA
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-2989421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, RICHARD B.
8508 PUNTA LORA
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: PD () Delete
Name: SPENCER, HAZEL
Address: 2403 BELLE FLOWER RD
City-St-Zip: PENSACOLA, FL 32526

Title: SD () Delete
Name: BAILLY, SHARON
Address: PO BOX 298
City-St-Zip: BAGDAD, FL 32530

Title: DT () Delete
Name: MILLS, JULIANA
Address: 8508 PUNTA LORA
City-St-Zip: PENSACOLA, FL 32514

Title: VD () Delete
Name: FARLEY, MONNEAN
Address: 6200 TIPP LN AVE
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JONES, TAMMY
Address: 1998 ALFRED BLVD.
City-St-Zip: NAVARRE, FL 32566 US

Title: SD (X) Change () Addition
Name: BAILLY, LUCI
Address: PO BOX 298
City-St-Zip: BAGDAD, FL 32530

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

Title: VD (X) Change () Addition
Name: FARLEY, MOONEAN
Address: 6200 TIPPIN AVE
City-St-Zip: PENSACOLA, FL 32504

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: JULIANA L MILLS

D/T

02/28/2009

Electronic Signature of Signing Officer or Director

Date