

FILE NOW: FILING FEE IS \$61.25

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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N37629** (5)
1. Corporation Name
WEST EAST HILL PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business 416 EAST BELMONT STREET PENSACOLA FL 32501	Mailing Address 416 EAST BELMONT STREET PENSACOLA FL 32501
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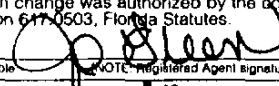
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 04/09/1990	4. FEI Number 59-3004420	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No		

9. Name and Address of Current Registered Agent
**EDELSTON, LYNETTE J.
714 E LA RUA ST
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent 81 Name JO Green 82 Street Address (P.O. Box Number is Not Acceptable) 416 EAST BELMONT ST 83 84 City PENSACOLA FL 85 Zip Code 32501
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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  DATE **4-6-98**

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	PD GREEN, JO
STREET ADDRESS	416 E. BELMONT STREET
CITY-ST-ZIP	PENSACOLA FL 32501
TITLE	☐ DELETE
NAME	VD TRIPP, JR. C
STREET ADDRESS	710 N. 7TH AVE.
CITY-ST-ZIP	PENSACOLA FL
TITLE	☒ DELETE
NAME	DS LAYNE, PASTOR EDDIE M
STREET ADDRESS	314 E. GADSDEN
CITY-ST-ZIP	PENSACOLA FL
TITLE	☐ DELETE
NAME	DT RICHIE, ROBBIE
STREET ADDRESS	410 E. BELMONT
CITY-ST-ZIP	PENSACOLA FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	D.S. A.G. Barnes
3.3 STREET ADDRESS	318 E Jackson St
3.4 CITY-ST-ZIP	Pensacola FL 32501
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ 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:  DATE **4-15-98** **850 477 0660**

CR2E037 (10/97)