

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37958

FILED  
Mar 23, 2010  
Secretary of State

**Entity Name:** LENOX HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3420 OAKMONT DR  
PENSACOLA, FL 32503 US

**New Principal Place of Business:**

**Current Mailing Address:**

3420 OAKMONT DR  
PENSACOLA, FL 32503 US

**New Mailing Address:**

**FEI Number:** 59-2995680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CARLAN, CAROL  
3420 OAKMONT DR  
PENSACOLA, FL 32503 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:** S  
**Name:** BELK, WILLIAM  
**Address:** 3450 OAKMONT DRIVE  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** T  
**Name:** CARLAN, CAROL  
**Address:** 3420 OAKMONT DR  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** PD  
**Name:** HUTCHINSON, JOHN  
**Address:** 3451 OAKMONT DRIVE  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** VPD  
**Name:** NAVAS, LUIS  
**Address:** 3441 OAKMONT DRIVE  
**City-St-Zip:** PENSACOLA, FL 32503

I hereby 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 all other like empowered.

**SIGNATURE:** CAROL CARLAN

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03/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date