## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47560

FILED Jan 09, 2008 Secretary of State

Entity Name: ROSEDOWN HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

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

C/O PATRICK KOZMA

2552 ROSEDOWN DRIVE

CANTONMENT, FL 32533 US

C/O SHARON SCHACK

2548 ROSEDOWN DRIVE

CANTONMENT, FL 32533 US

CANTONMENT, FL 32533 US

Current Mailing Address: New Mailing Address:

C/O PATRICK KOZMA C/O SHARON SCHACK P.O. BOX 551 P.O. BOX 551

GONZALEZ, FL 32560 US GONZALEZ, FL 32560 US

FEI Number: 59-3309259 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:

KOZMA, PATRICK
2552 ROSEDOWN DRIVE
CANTONMENT, FL 32533
US
SCHACK, SHARON
2548 ROSEDOWN DRIVE
CANTONMENT, FL 32533
US
CANTONMENT, FL 32533
US

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: SHARON SCHACK 01/09/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 KOZMA, PATRICK
 Name:
 SCHACK, SHARON

 Address:
 2552 ROSEDOWN DRIVE
 Address:
 2548 ROSEDOWN DRIVE

Address: 2552 ROSEDOWN DRIVE Address: 2548 ROSEDOWN DRIVE City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: CANTONMENT, FL 32533

Title: VD ( ) Delete Title: VP (X) Change ( ) Addition Name: SCHACK, SHARON Name: MIMS, BILLY

Address: 2548 ROSEDOWN DR Address: 2508 ROSEDOWN DRIVE City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: CANTONMENT, FL 32533

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 KOZMA, PORTIA
 Name:
 WCISLO, JOSEPH G

 Address:
 2552 ROSEDOWN DR
 Address:
 2521 ROSEDOWN DRIVE

 City-St-Zip:
 CANTONMENT, FL 32533
 City-St-Zip:
 CANTONMENT, FL 32533

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: JOSEPH G. WCISLO TR 01/09/2008