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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N50099 (3)
1. Corporation Name
CARRIAGE HILLS HOMEOWNERS ASSOCIATION, INC. OF PENSACOLA

Principal Place of Business 1897 BROYHILL LANE PENSACOLA FL 32526	Mailing Address 1897 BROYHILL LANE PENSACOLA FL 32526 US
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2. Principal Place of Business 21 5410 TOMLINSON RD Suite, Apt. #, etc. 22 PENSACOLA FL 32526 City & State 23 Zip 24 Country	2a. Mailing Address 26 5410 TOMLINSON RD Suite, Apt. #, etc. 27 PENSACOLA FL 32526 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 07/28/1992	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
KING, ETHELANNE
1897 BROYHILL LANE
PENSACOLA FL 32526

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	HESS, ELEANOR G. 5410 TOMLINSON RD PENSACOLA FL 32526-6590
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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 Eleanor G. Hess ELEANOR G. HESS February 9, 1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	KING, ETHELANNE	
STREET ADDRESS	1897 BROYHILL LANE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	PEREZ, PONCHO	
STREET ADDRESS	5423 TOMLINSON RD.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RAMSEY, CHARLES D.	
STREET ADDRESS	2030 COLONY RD.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	GOODRICH, SUZY	
STREET ADDRESS	2603 TOMLINSON ROAD	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CARNLEY, SCOTT	
STREET ADDRESS	1867 BROYHILL LANE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WASDEN, BLANCHE	
STREET ADDRESS	2006 COLONY RD.	
CITY-ST-ZIP	PENSACOLA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HESS, ELEANOR G.	
1.3 STREET ADDRESS	5410 TOMLINSON RD	
1.4 CITY-ST-ZIP	PENSACOLA FL 32526-6590	
2.1 TITLE	V. LEVY LILLIAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	2541 TOMLINSON RD	
2.4 CITY-ST-ZIP	PENSACOLA FL 32526	
3.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	RAMSEY CHARLES D.	
3.3 STREET ADDRESS	2030 COLONY RD	
3.4 CITY-ST-ZIP	PENSACOLA FL 32526	
4.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	GOODRICH KEN	
4.3 STREET ADDRESS	2603 BROYHILL LANE	
4.4 CITY-ST-ZIP	PENSACOLA FL 32526	
5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	CLARK, LUCY	
5.3 STREET ADDRESS	2014 BROYHILL LANE	
5.4 CITY-ST-ZIP	PENSACOLA FL 32526	
6.1 TITLE	S	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	JACOBS BARBARA	
6.3 STREET ADDRESS	2624 TOMLINSON RD	
6.4 CITY-ST-ZIP	PENSACOLA FL 32526	

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: Eleanor G. Hess ELEANOR G. HESS February 9, 1998 850-451-1881

CR2E037 (10/97)

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MARTIN, WILLIAM

5421 TOMLINSON RD

PENNSH COOLA FL 32526