

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003580

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** THE COTTAGES AT GRANDPOINTE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 BAYOU BLVD  
SUITE 35  
PENSACOLA, FL 32503 US

**New Principal Place of Business:**

**Current Mailing Address:**

4400 BAYOU BLVD  
SUITE 35  
PENSACOLA, FL 32503 US

**New Mailing Address:**

**FEI Number:** 59-3280385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGWELL, TINA  
4400 BAYOU BLVD  
SUITE 35  
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: PD ( ) Delete  
Name: PEEBLES, KEVIN  
Address: 114 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: VD ( ) Delete  
Name: MCCARN, KELLY  
Address: 117 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: SUPER, BRENDA  
Address: 104 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: TOMBERLAIN, SANDRA  
Address: 193 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: EARNHEART, GRADY  
Address: 164 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: VD (X) Change ( ) Addition  
Name: BAKER, JOHN  
Address: 164 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: TD (X) Change ( ) Addition  
Name: NELSON, DORIS  
Address: 162 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

Title: STD (X) Change ( ) Addition  
Name: TOMBERLAIN, SANDRA  
Address: 193 WILDFLOWER LANE  
City-St-Zip: PENSACOLA, FL 32514

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDY TOMBERLAIN

STD

04/30/2006

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

\_\_\_\_\_  
Date