

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004821

FILED  
Apr 10, 2010  
Secretary of State

**Entity Name:** PERDIDO BAY COUNTRY CLUB ESTATES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

5168 CHOCTAW AVE  
PENSACOLA, FL 32507 US

**New Principal Place of Business:**

5240 CHOCTAW AVE  
PENSACOLA, FL 32507 US

**Current Mailing Address:**

PO BOX 34419  
PENSACOLA, FL 32507 US

**New Mailing Address:**

**FEI Number:** 59-2353442      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KIEVIT, ODOM & BARLOW  
635 WEST GARDEN ST  
PENSACOLA, FL 32502 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: P  
Name: HENDERSON, BILL  
Address: 5240 CHOCTAW AVE  
City-St-Zip: PENSACOLA, FL 32507

Title: VP  
Name: DOBSON, DAN  
Address: 5256 CHOCTAW AVE  
City-St-Zip: PENSACOLA, FL 32507

Title: S  
Name: MINERMAN, CHUCK  
Address: 5214 CHOCTAW AVE  
City-St-Zip: PENSACOLA, FL 32507

Title: T  
Name: HOFFMAN, DAN  
Address: 5 BOW STRING CIR  
City-St-Zip: PENSACOLA, FL 32507

Title: D  
Name: MITCHELL, TOM  
Address: 5168 CHOCTAW AVE  
City-St-Zip: PENSACOLA, FL 32507

Title: D  
Name: MILLER, JERRY  
Address: 5213 CHOCTAW AVE  
City-St-Zip: PENSACOLA, FL 32507

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: DAN HOFFMAN

T

04/10/2010

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

\_\_\_\_\_  
Date