2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000473

FILED Jan 17, 2011 Secretary of State

Entity Name: UNITED PENINSULA ASSOCIATION, INC.

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

1129 PARK LANE

GULF BREEZE, FL 32563

Current Mailing Address: New Mailing Address:

PO BOX 6003

GULF BREEZE, FL 32563

FEI Number: 59-3437138 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:

RICHARDS, DON J 1129 PARK LANE

GULF BREEZE, FL 32563 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: RICHARDS, DON Address: 1129 PARK LANE

City-St-Zip: GULF BREEZE, FL 32563

Title: VP

 Name:
 ROLLINS, PAUL

 Address:
 3991 BAY POINTE DR

 City-St-Zip:
 GULF BREEZE, FL 32563

Title: SEC

Name: SILVER, RUSS

Address: 1194 GRAND POINTE DR City-St-Zip: GULF BREEZE, FL 32563

Title: TRES

Name: ANDEL, MICHAEL H

Address: 3040 CORAL STRIP PKWY City-St-Zip: GULF BREEZE, FL 32563

Title: PPRE

 Name:
 MCPHERSON, JOE

 Address:
 1194 GUZEMAN RD

 City-St-Zip:
 GULF BREEZE, FL 32563

Title:

 Name:
 COX, CONNIE

 Address:
 971 AQUAMARINE DR

 City-St-Zip:
 GULF BREEZE, FL 32563

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: MICHAEL ANDEL TRES 01/17/2011