

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005022

FILED
May 15, 2005
Secretary of State

Entity Name: ADRIAN WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5001 COMMERCE PK. CIR
PENSACOLA, FL 32505

New Principal Place of Business:

P O BOX 732
MILTON, FL 32572 US

Current Mailing Address:

5001 COMMERCE PK. CIR
PENSACOLA, FL 32505

New Mailing Address:

P O BOX 732
MILTON, FL 32572 US

FEI Number: 59-3503910 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BARNES, JOEY L
5001 COMMERCE PK. CIR
PENSACOLA, FL 32505 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: D () Delete
Name: GAGNE, JON
Address: 1052 ASHLEY RD
City-St-Zip: MILTON, FL 32583

Title: D () Delete
Name: ABSHIRE, LEONARD
Address: 1043 ADRIAN WAY
City-St-Zip: MILTON, FL 32583

Title: T () Delete
Name: BARNES, JOEY L
Address: 5001 COMMERCE PK. CIR
City-St-Zip: PENSACOLA, FL 32505

Title: P (X) Delete
Name: FIGOLAH, JAMES R
Address: 8917 DAVIS HWY., APT #128
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARNES, JOEY L
Address: 5001 COMMERCE PARK CIRCLE
City-St-Zip: PENSACOLA, FL 32505

Title: D (X) Change () Addition
Name: FIGOLAH, JAMES R
Address: 8917 DAVIS HWY., APT. #128
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change () Addition
Name: ABSHIRE, LEONARD J JR.
Address: 1043 ADRIAN WAY
City-St-Zip: MILTON, FL 32583

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEONARD J. ABSHIRE, JR.

D

05/15/2005

Electronic Signature of Signing Officer or Director

Date