

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 27 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 # **N97000006093 (5)**

1. Corporation Name

PEN HAVEN NEIGHBORHOOD WATCH ASSOCIATION, INC.



Principal Place of Business 1414 NORTH 48TH AVENUE PENSACOLA FL 32506	Mailing Address 1414 NORTH 48TH AVENUE PENSACOLA FL 32506
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3. Date Incorporated or Qualified

10/27/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 25	2b. Mailing Address 30 Zip 30 Country 30
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5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREDERICK, H.G.
1414 NORTH 48TH AVENUE
PENSACOLA FL 32506**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	FREDERICK, H.G.
STREET ADDRESS	1414 NORTH 48TH AVENUE
CITY-ST-ZIP	PENSACOLA FL 32506
TITLE	VD <input type="checkbox"/> DELETE
NAME	BOYLE, NATHAN
STREET ADDRESS	1308 NORTH 48TH AVENUE
CITY-ST-ZIP	PENSACOLA FL 32506
TITLE	TD <input type="checkbox"/> DELETE
NAME	HAMMAC, ALMA
STREET ADDRESS	1418 49TH AVENUE
CITY-ST-ZIP	PENSACOLA FL 32506
TITLE	S <input type="checkbox"/> DELETE
NAME	MORAN, FAYE
STREET ADDRESS	40 PEN HAVEN AVENUE
CITY-ST-ZIP	PENSACOLA FL 32506
TITLE	D <input type="checkbox"/> DELETE
NAME	MORRIS, SOUG
STREET ADDRESS	2 PEN HAVEN AVENUE
CITY-ST-ZIP	PENSACOLA FL 32506
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addit
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Ai
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Ad
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Ad
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

H. Frederick

7 (10/97)