

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006678

FILED
Apr 30, 2006
Secretary of State

Entity Name: EAGLE RIDGE HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

Current Principal Place of Business:

4400 BAYOU BLVD
SUITE 35
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

4400 BAYOU BLVD
SUITE 35
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-2266344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHALK, WESLEY
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: BASHAM, DEVIN
Address: 1769 BRENTCO RD
City-St-Zip: CANTONMENT, FL 32533

Title: VD () Delete
Name: ROSWOLD, ROBERT
Address: 1671 CONDOR DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: LEE, DAVID
Address: 1918 WAXWING DR
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: WILKERSON, GREG
Address: 1708 CONDOR DR
City-St-Zip: CANTONMENT, FL 32533

Title: D (X) Delete
Name: CAVE, ORVILLE
Address: 1755 CONDOR DR
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VOGELSANG, JOHN
Address: 1911 WAXWING DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: VD (X) Change () Addition
Name: WOJDYLA, KIMMIE
Address: 1759 CONDOR DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: STD (X) Change () Addition
Name: MAHANKE, KATHY
Address: 1796 CONDOR DR
City-St-Zip: CANTONMENT, FL 32533

Title: TRD (X) Change () Addition
Name: NETZER, ALLEN
Address: 1764 CONDOR DR
City-St-Zip: CANTONMENT, FL 32533

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 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: JOHN VOGELSANG

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date