

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000454

FILED  
May 04, 2006  
Secretary of State

Entity Name: PENSACOLA SENIOR FOLLIES, INC.

**Current Principal Place of Business:**

1600 VIA DE LUNA  
E-108  
PENSACOLA BEACH, FL 325612250 US

**New Principal Place of Business:**

**Current Mailing Address:**

1600 VIA DE LUNA  
E-108  
PENSACOLA BEACH, FL 325612250 US

**New Mailing Address:**

P.O. BOX 88  
GULF BREEZE, FL 325622250 US

FEI Number: 59-3487667      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:**

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

TURK, KENNETH  
1600 VIA DE LUNA  
E-108  
PENSACOLA BEACH, FL 325612250 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: PD ( ) Delete  
Name: TURK, KENNETH  
Address: 1600 VIA DE LUNA  
City-St-Zip: PENSACOLA BEACH, FL 325612250 US

Title: VPD ( ) Delete  
Name: TURK, CAROLYNN  
Address: 1600 VIA DE LUNA E 108  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: SD ( ) Delete  
Name: NEALE, TRACEY  
Address: 2288 BALBOA COURT  
City-St-Zip: NAVARRE, FL 32566

Title: TD ( ) Delete  
Name: LEE, CAROLYN  
Address: 1714 E DE SOTO ST  
City-St-Zip: PENSACOLA, FL 32501

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: KENNETH TURK

PD

05/04/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date