2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N99000003802

Entity Name: SCENIC TERRACE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1700 SCENIC HWY
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

1700 SCENIC HWY
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3606582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEE, CHARLES
2530 CELTIC CIRCLE
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: NYE, CHARLES H
Address: 1700 SCENIC HWY #1100
City-St-Zip: PENSACOLA, FL 32503

Title: BM ( ) Delete
Name: GOULD, CHARLES
Address: 1700 SCENIC HWY #900
City-St-Zip: PENSACOLA, FL 32503

Title: VPD ( ) Delete
Name: MEYER, JEANNE
Address: 1700 SCENIC HWY #1001
City-St-Zip: PENSACOLA, FL 32503

Title: STD ( ) Delete
Name: HOLLIMON, PHOEBE
Address: 1700 SCENIC HWY # 201
City-St-Zip: PENSACOLA, FL 32503

Title: BM ( ) Delete
Name: ROOK, EUGENE C
Address: 1700 SCENIC HWY #802
City-St-Zip: PENSACOLA, FL 32503

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES H NYE PRES 01/12/2009

Electronic Signature of Signing Officer or Director — Date