

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003802

FILED  
Mar 22, 2012  
Secretary of State

**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  
Name: NYE, CHARLES H  
Address: 1700 SCENIC HWY #1100  
City-St-Zip: PENSACOLA, FL 32503

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

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

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

Title: BM  
Name: DARBY, ISAAC  
Address: 1700 SCENIC HWY #902  
City-St-Zip: PENSACOLA, FL 32503

I hereby 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 all other like empowered.

**SIGNATURE:** CHARLES H NYE

PRES

03/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date