

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 11, 2009  
Secretary of State**

DOCUMENT# N99000006649

**Entity Name:** NORTH ENCLAVE HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

**Current Principal Place of Business:**

6150 N ENCLAVE DRIVE  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

6150 N ENCLAVE DRIVE  
PENSACOLA, FL 32504

**New Mailing Address:**

**FEI Number:** 59-3542545      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WEBER, JAMES M  
SEVENTH FLOOR BLOUNT BUILDING  
3 WEST GARDEN STREET  
PENSACOLA, FL 32501 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: PRES ( ) Delete  
Name: HAMMOND, JAKE C  
Address: 6150 N ENCLAVE DRIVE  
City-St-Zip: PENSACOLA, FL 32504

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

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: JAKE C HAMMOND

PRES

03/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date