2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# P97000069517

Entity Name: THE ARAGON GROUP AT PENSACOLA, INC.

Current Principal Place of Business:

730 BAYFRONT PARKWAY
SUITE IV-B
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

730 BAYFRONT PARKWAY
SUITE IV-B
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 59-3536547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REEVES, JAMES
730 BAYFRONT PKWY
STE 4B
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DSTV	( ) Delete
Name:	REEVES, JAMES J	
Address:	730 BAYFRONT PKWY	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	DP	( ) Delete
Name:	BOOTHE, ROBERT A JR	
Address:	16 ALICE STREET	
City-St-Zip:	PENSACOLA, FL 32504	
Title:	DVP	( ) Delete
Name:	MONTGOMERY, ROBERT M	
Address:	1388 COUNTRY CLUB ROAD	
City-St-Zip:	GULF BREEZE, FL 32561	
Title:	VPAS	( ) Delete
Name:	MACNEIL, MICHELLE R	
Address:	105 EAST DESOTO STREET	
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES J. REEVES DSTV 02/11/2009

Electronic Signature of Signing Officer or Director — Date