

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747810

FILED
Mar 19, 2009
Secretary of State

Entity Name: S.O.CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, STE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, STE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-2030167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT, INC.
2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 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: D () Delete
Name: PRICE, JOE
Address: 1112 W. MAIN U-6
City-St-Zip: LEESBURG, FL 34748

Title: D () Delete
Name: HALL, CAROL
Address: 1112 W. MAIN ST. H-7
City-St-Zip: LEESBURG, FL 34748

Title: SD () Delete
Name: VANCE, JOHN,
Address: 1112 W MAIN ST #14
City-St-Zip: LEESBURG, FL

Title: P () Delete
Name: ABBEY, MARILYN
Address: 1112 W. MAINS STREET #E5
City-St-Zip: LEESBURG, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PRICE, JOE
Address: 1112 W MAIN ST #J6
City-St-Zip: LEESBURG, FL 34748

Title: VPD (X) Change () Addition
Name: HAYES, BILL
Address: 1112 W MAIN ST J7
City-St-Zip: LEESBURG, FL 34748

Title: SD (X) Change () Addition
Name: VANCE, JOHN
Address: 1112 W MAIN ST #14
City-St-Zip: LEESBURG, FL 34748

Title: D (X) Change () Addition
Name: GAGE, SALLY
Address: 1112 W MAIN ST #H6
City-St-Zip: LEESBURG, FL 34748

Title: D () Change (X) Addition
Name: BENNETT, JUSTIN
Address: 1112 W MAIN ST #B6
City-St-Zip: LEESBURG, FL 34748

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: JOE PRICE

Electronic Signature of Signing Officer or Director

PD

03/19/2009

Date