

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90063 044 ****61.25

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DOCUMENT # N03000003682 1. Entity Name SOUTHERN CREEK OWNERS ASSOCIATION, INC.					
Principal Place of Business 5455 AIA SOUTH SAINT AUGUSTINE, FL 32080			Mailing Address 5455 AIA SOUTH SAINT AUGUSTINE, FL 32080		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>1121 Woodmere Dr</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State <i>Jacksonville, FL</i>		4. FEI Number 20-0170319	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip <i>32210</i>		Country		03292007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent MAY MANAGEMENT SERVICES 3455 AIA SOUTH SAINT AUGUSTINE, FL 32080				7. Name and Address of New Registered Agent Name <i>Flagship Association mgmt Ent, Inc.</i> Street Address (P.O. Box Number is Not Acceptable) <i>1121 Woodmere Dr</i> City <i>Jacksonville</i> FL Zip Code <i>32210</i>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ZAKOSKE, JOHN <input type="checkbox"/> Delete 9456 PHILIPS HIGHWAY, SUITE 1 JACKSONVILLE, FL 32256		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sue Meyer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition President, Board of Directors 209 Northbridge Court Jacksonville, FL 32259	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEARING, MARK C <input type="checkbox"/> Delete 9456 PHILIPS HIGHWAY, SUITE 1 JACKSONVILLE, FL 32256		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ellen D. Vittorio <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Treasurer 193 Southern Bay Drive Jacksonville, FL 32259	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COSTA, DYLAN <input type="checkbox"/> Delete 834 SOUTHERN CREEK DR JACKSONVILLE, FL 32259		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dylan Costa <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Director 834 Southern Creek Dr. Jacksonville, FL 32259	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Catherine Allen <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Secretary 217 Northbridge Court Jacksonville, FL 32259	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Susan A. Myers</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<i>4/11/07</i> <i>904-294-0421</i> <small>Date Daytime Phone #</small>		