

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005708

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: SOUTH BEACH CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

240 14TH AVENUE SOUTH  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

330 A1A NORTH, SUITE 321  
PONTE VERA BEACH, FL 32080

**Current Mailing Address:**

PO BOX 330026  
ATLANTIC BEACH, FL 32233

**New Mailing Address:**

FEI Number: 59-3362969      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HUNTER, FRANK  
240 14TH AVENUE SOUTH  
JACKSONVILLE BEACH, FL 32250      US

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

HUNTER, FRANK  
330 A1A NORTH, SUITE 321  
PONTE VEDRA BEACH, FL 32082      US

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: \_\_\_\_\_

03/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD      ( ) Delete  
Name: HASELDEN, EDWARD  
Address: 1224 S 1ST STREET #2-C  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD      ( ) Delete  
Name: SELLERS, CHARLES W  
Address: 1224 1ST ST S, UNIT 2A  
City-St-Zip: JACKSONVILLE, FL 32250

Title: DS      ( ) Delete  
Name: CONWAY, RICHARD  
Address: 1224 S 1ST STREET #3-C  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D      ( ) Delete  
Name: SELLERS, COLETTE  
Address: 1224 1ST S, UNIT 2A  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D      ( ) Delete  
Name: EVERIDGE, HERMAN  
Address: 1224 1ST ST S, UNIT 1C  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**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:

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: ED HASELDEN

TREA

03/18/2009

Electronic Signature of Signing Officer or Director

Date