

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000155

FILED
Apr 23, 2004
Secretary of State**Entity Name:** SUTHERLAND NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 59-3577477**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES W JR.
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044**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:** PD () Delete
Name: HACKER, E. BING
Address: 1900 KINGS RIDGE BLVD.
City-St-Zip: CLERMONT, FL 34711**Title:** VD () Delete
Name: ECKERT, TERRY
Address: 1900 KINGS RIDGE BLVD
City-St-Zip: CLERMONT, FL 34711**Title:** STD () Delete
Name: SODERMARK, CHRISTINE
Address: 1900 KINGS RIDGE BLVD.
City-St-Zip: CLERMONT, FL 34711**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: BELLEHUMEUR, TOM
Address: 2311 EDMONTON CT
City-St-Zip: CLERMONT, FL 34711**Title:** VPD (X) Change () Addition
Name: BENTZ, BILL
Address: 4370 SAMBOURNE ST
City-St-Zip: CLERMONT, FL 34711**Title:** SD (X) Change () Addition
Name: STELLHORN, JACK
Address: 2298 EDMONTON CT
City-St-Zip: CLERMONT, FL 34711**Title:** TD () Change (X) Addition
Name: GOLOMB, JIM
Address: 2310 EDMONTON CT
City-St-Zip: CLERMONT, FL 34711**Title:** D () Change (X) Addition
Name: THOMAS, RICHARD
Address: 4388 SAMBOURNE ST
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM BELLEHUMEUR

PD

04/23/2004

Electronic Signature of Signing Officer or Director

Date