

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 24, 2009
Secretary of State**

DOCUMENT# P01000064781

Entity Name: SINGLETON MANAGEMENT, INC.

Current Principal Place of Business:

1800 EAST ALTANIC BLVD
POMPANO BEACH, FL 33060

New Principal Place of Business:

1800 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060

Current Mailing Address:

1800 EAST ALTANIC BLVD
POMPANO BEACH, FL 33060

New Mailing Address:

1800 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060

FEI Number: 65-1123881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINKLE, DARRYL L
2600 N.E. 14TH ST
POMPANO BEACH, FL 33062 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: PSD () Delete
Name: SINGLETON, CHARLES G
Address: 1800 EAST ALTANIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

Title: VTD () Delete
Name: SINGLETON, SADIE
Address: 1800 EAST ALTANIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SINGLETON, CHARLES G
Address: 1800 EAST ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

Title: VSTD (X) Change () Addition
Name: PETERS, CYNTHIA
Address: 1736 EAST ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

Title: VSTD () Change (X) Addition
Name: CLARK, GLENDA
Address: 515 N.E. 4TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: VSTD () Change (X) Addition
Name: SIMON, JENNIFER
Address: 1801 S.E. 2ND STREET
City-St-Zip: POMPANO BEACH, FL 33060

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: JENNIFER SIMON

VSTD

07/24/2009

Electronic Signature of Signing Officer or Director

_____ Date