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2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 90722 047 ****61.25

DOCUMENT # 756406

1. Entity Name
SOUTHBRIDGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3915 S. FLAGLER DRIVE #116 WEST PALM BEACH, FL 33405 US	PO BOX 7610 WEST PALM BEACH, FL 33405 US

04212004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2195774 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COLE, SCOTT & KISSANE, P.A.
222 LAKEVIEW AVENUE, SUITE 280
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent

Name Touchstone Webb Management
Street Address (P.O. Box Number is Not Acceptable) 225 Southern Blvd Ste 202
City West Palm Bch FL Zip Code 33405

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MANFRATES, TONI ANN 3915 S. FLAGLER DRIVE# 109 WEST PALM BEACH, FL 33405	☒ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GRAWE, JOHN 3915 S. FLAGLER DRIVE, #313 WEST PALM BEACH, FL 33405	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANCHEZ, FERNANDO 3915 S. FLAGLER DRIVE1, # 103 WEST PALM BEACH, FL 33405	☒ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROSS, ROSEMARY 3369 S. OCEAN BLVD. #4-B1 WEST PALM BEACH, FL 33405	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIORENTINO, MARCELL 343 FRANKLIN RD. WEST PALM BEACH, FL 33405	☒ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, ALEXANDER 3915 S. FLAGLER #321 WEST PALM BEACH, FL 33405	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Richard Heities 3915 S. Flagler Dr. APT 118 West Palm Bch Fl 33405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Rosemary Ross 3369 S. Ocean Blvd #4-B1 Palm Beach, Fl 33480	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Mary Lohr 3915 S. Flasler Dr Apt 306 West Palm Bch Fl 33405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Terrance Sheriden 3915 S. Flasler Dr Apt 309 West Palm Bch Fl 33405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby *certify* that the information supplied with this filing does not qualify 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 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: Mary Lohr 4/28/04 561 833-4483
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #