2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# 756406

Entity Name: SOUTHBRIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3915 SOUTH FLAGLER DRIVE
WEST PALM BEACH, FL 33405 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2319
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: 59-2195774 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILLEY & WYANT-CORTEZ PA
860 US HWY 1 CUITE 108
NORTH PALM BEACH, FL 33408 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: PD ( ) Delete
Name: GRAWE, JOHN
Address: 3915 SOUTH FLAGLER DRIVE #313
City-St-Zip: WEST PALM BEACH, FL 33405

Title: VPD ( ) Delete
Name: ROTH, CHRIS
Address: 3915 SOUTH FLAGLER DRIVE # 214
City-St-Zip: WEST PALM BEACH, FL 33405

Title: STD ( ) Delete
Name: CLECKNER, MARY ANN
Address: 620 CREST RD
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: UCGAN-WEEMS, GULNUR
Address: 3915 SOUTH FLAGLER DRIVE # 318
City-St-Zip: WEST PALM BEACH, FL 33405

Title: PD (X) Change ( ) Addition
Name: ROTH, CHRIS
Address: 3915 SOUTH FLAGLER DRIVE # 214
City-St-Zip: WEST PALM BEACH, FL 33405

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: CHRIS ROTH PD 04/01/2009

Electronic Signature of Signing Officer or Director — Date