

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725816

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: S.C. CONDOMINIUM, INC.

## Current Principal Place of Business:

4445 SOUTH ATLANTIC AVENUE  
#104  
PONCE INLET, FL 32127

## New Principal Place of Business:

## Current Mailing Address:

4445 SOUTH ATLANTIC AVENUE  
#104  
PONCE INLET, FL 32127

## New Mailing Address:

FEI Number: 59-1564467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PIERCE, BARBARA C  
4445 S ATLANTIC AVE  
#104  
PONCE INLET, FL 32127 US

## Name and Address of New Registered Agent:

ROBINSON, SUE A  
4445 S ATLANTIC AVE  
#104  
PONCE INLET, FL 32127 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: SUE A. ROBINSON

01/19/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: ZUBER, ROBERT  
Address: P.O. BOX 5482  
City-St-Zip: TITUSVILLE, FL 32783

Title: VP ( ) Delete  
Name: ARGO, NANCY  
Address: 4445 S. ATLANTIC AVE #503  
City-St-Zip: PONCE INLET, FL 32127

Title: SEC ( ) Delete  
Name: BRIDEWELL, PATRICIA  
Address: 4435 S. ATLANTIC AVE. #512  
City-St-Zip: PONCE INLET, FL 32127

Title: TRES ( ) Delete  
Name: ONDICK, ANNA  
Address: 989 GREENTREE DR  
City-St-Zip: WINTER PARK, FL 32789

Title: DIR ( ) Delete  
Name: BURKHALTER, KAREN  
Address: 4435 S. ATLANTIC AVE. #616  
City-St-Zip: PONCE INLET, FL 32127

Title: DIR ( ) Delete  
Name: SUSIE, HAGEY DR  
Address: 4445 S. ATLANTIC AVE #103  
City-St-Zip: PONCE INLET, FL 32127

## 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: TRES (X) Change ( ) Addition  
Name: LOWERY, SAM  
Address: 4435 S. ATLANTIC AVENUE  
City-St-Zip: PONCE INLET, FL 32127

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR (X) Change ( ) Addition  
Name: ONDICK, ANNA  
Address: 4445 S. ATLANTIC AVE #103  
City-St-Zip: PONCE INLET, FL 32127

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: NANCY ARGO

VP

01/19/2009

Electronic Signature of Signing Officer or Director

Date