## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#725816** 

FILED Jan 12, 2010 Secretary of State

Entity Name: S.C. CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

4445 SOUTH ATLANTIC AVENUE

#104

PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

4445 SOUTH ATLANTIC AVENUE #104

PONCE INLET, FL 32127

FEI Number: 59-1564467 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: PRES

Name: ZUBER, ROBERT
Address: P.O. BOX 5482
City-St-Zip: TITUSVILLE, FL 32783

Title: VP

Name: ARGO, NANCY

Address: 4445 S. ATLANTIC AVE #503 City-St-Zip: PONCE INLET, FL 32127

Title: SEC

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

Title: TRES

Name: LOWERY, SAM

Address: 4435 S. ATLANTIC AVENUE #713 City-St-Zip: PONCE INLET, FL 32127

Title: DIR

 Name:
 BURKHALTER, KAREN

 Address:
 4435 S. ATLANTIC AVE. #616

 City-St-Zip:
 PONCE INLET, FL 32127

Title: DIR

Name: ONDICK, ANNA

Address: 4445 S. ATLANTIC AVE #502 City-St-Zip: PONCE INLET, FL 32127

I hereby 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 all other like empowered.

SIGNATURE: SUE A. ROBINSON MGM 01/12/2010