2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2009
Secretary of State

DOCUMENT# 727335

Entity Name: SEMINOLE-ON-THE-GREEN, VILLAS UNIT NO. FOUR SOUTH ASSOCIATION, INC.

Current Principal Place of Business:

9101 PINEHURST DR.
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

9101 PINEHURST DR.
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 59-1674708 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACHT, NANCY
9101 PINEHURST DRIVE
SEMINOLE, FL 33777 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: P ( ) Delete
Name: MACHT, NANCY
Address: 9101 PINEHURST DRIVE
City-St-Zip: SEMINOLE, FL 33777

Title: D ( ) Delete
Name: KIBLER, KEN
Address: 9113 PINEHURST DRIVE
City-St-Zip: SEMINOLE, FL 33777

Title: S ( ) Delete
Name: CAREY, MARY ANN
Address: 9183 PINEHURST DRIVE
City-St-Zip: SEMINOLE, FL 33777

Title: VP ( ) Delete
Name: HARRIS, ROSE MARIE
Address: 9155 PINEHURST DR.
City-St-Zip: SEMINOLE, FL 33772 US

Title: D (X) Delete
Name: JORDAN, J T
Address: 9021 PINEHURST DR.
City-St-Zip: SEMINOLE, FL 33772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: CAREY, PAUL
Address: 9183 PINEHURST DRIVE
City-St-Zip: SEMINOLE, FL 33777

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

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: NANCY MACHT P 03/29/2009

Electronic Signature of Signing Officer or Director — Date