

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745172

FILED
Apr 20, 2009
Secretary of State

Entity Name: SEMINOLE COUNTRY GREEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7550-7750 92ND STREET N
SEMINOLE, FL 33777 US

New Principal Place of Business:

Current Mailing Address:

7300 PARK ST
SEMINOLE, FL 33777

New Mailing Address:

FEI Number: 59-2069892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOT, THOMAS A
7300 PARK STREET
SEMINOLE, FL 33777 US

Name and Address of New Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 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: DEBBIE REINHARDT

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAIMAN, GAIL
Address: 7560 92ND ST N 101-B
City-St-Zip: SEMINOLE, FL 33777

Title: VP () Delete
Name: SANTO, JOANNE
Address: 7680 92ND ST. N. 109 F
City-St-Zip: SEMINOLE, FL 33777

Title: T () Delete
Name: PETERS, BELINDA
Address: 7700 92ND ST. N. 102G
City-St-Zip: SEMINOLE, FL 33777

Title: A/L (X) Delete
Name: RAYNER, LEIGH
Address: 7700 92ND ST. N. 104A
City-St-Zip: SEMINOLE, FL 33777

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: () 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: GAIL BAIMAN

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date