

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756408

**FILED**  
**Apr 01, 2009**  
**Secretary of State**

**Entity Name:** SOUTHRIDGE VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

15931 S.W. 8TH AVENUE  
DELRAY BCH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

15931 S.W. 8TH AVENUE  
DELRAY BCH, FL 33484

**New Mailing Address:**

**FEI Number:** 59-2171937      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEHAR, ELI  
4309 LIVE OAK BLVD.  
DELRAY BEACH, FL 33445      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: BEHAR, ELI  
Address: 15931 S.W. 8TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33484

Title: SD      ( ) Delete  
Name: HOLCOMB, JACQUELINE  
Address: 5928 PEACOCK LANE  
City-St-Zip: HOSCHTON, GA 30548

Title: TD      ( ) Delete  
Name: BEHAR, RAYMONDE  
Address: 15931 S.W. 8TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33484

**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:

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: RAYMONDE BEHAR

TD

04/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date