


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90047 049 ****61.25

DOCUMENT # 757334					
1. Entity Name SOUTHLAND CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1125-68TH AVE.DRIVE, W. BRADENTON, FL 34207		Mailing Address 1125-68TH AVE.DRIVE, W. BRADENTON, FL 34207			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2146307	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ABRAHAM, GEORGE L. 1103-68TH AVENUE DRIVE, W. BRADENTON, FL 34207			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TSD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ABRAHAM, GEORGE L.	NAME			
STREET ADDRESS	1103-68TH AVE.DRIVE, W.	STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MATURANA, RICARDO N	NAME			
STREET ADDRESS	1121 68TH AVE DR W	STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 34207	CITY-ST-ZIP			
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CUNDER, CAROL	NAME			
STREET ADDRESS	1227 68TH AVE. DR. WEST	STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 34207	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOISE, MIKE	NAME			
STREET ADDRESS	PO BOX 188	STREET ADDRESS			
CITY-ST-ZIP	TALLEVAST, FL 34270	CITY-ST-ZIP			
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GUYTON, JAMES E II	NAME			
STREET ADDRESS	1132 68TH AVE DR W	STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 34207	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>George L. Abraham</i>		Date: <i>2-2-05</i>		Daytime Phone #: <i>941-756-7016</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	