## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 759655** 

FILED Feb 26, 2006 Secretary of State

Entity Name: SOUTH RIVER VILLAGE ONE CONDOMINIUM ASSOCIATION, INC.

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

30 SW SOUTH RIVER DRIVE STUART, FL 34997

**Current Mailing Address: New Mailing Address:** 

30 SW SOUTH RIVER DRIVE STUART, FL 34997

FEI Number: 59-2142504 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:

CORNETT, JANE P.A 401 E. OSĆEOLA STREET STUART, FL 34994

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MCCOY, JOHN OZOLS, GUNARS M Name: Name: 61 SW SOUTH RIVER DR., #207 Address: 61 SW SOUTH RIVER DRIVE, #201 Address:

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: () Delete Title: (X) Change ( ) Addition

OZOLS, GUNNARS M Name: GEBHARDT, HANS J Name: Address: 61 SW SOUTH RIVER DR., #201 Address: 241 SW SOUTH RIVER DRIVE, #203

City-St-Zip: STUART, FL 34997

STUART, FL 34997 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

MARLIN, ANDREW A WELCH, PAULINE R Name: Name: 151 SW SOUTH RIVER DRIVE, #105 91 SW SOUTH RIVER DR., #104 Address:

Address: City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: TD ( ) Delete Title: () Change () Addition

Name: ROBINSON, RONALD J Name: 121 SW SOUTH RIVER DR #202 Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

GEBHARDT, HANS J GRAU, FREDERICK W Name: Name:

241 SW SOUTH RIVER DRIVE, #203 241 SW SOUTH RIVER DRIVE, #207 Address: Address:

STUART, FL 34997 City-St-Zip: STUART, FL 34997 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GUNARS M. OZOLS PD 02/26/2006