

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Apr 02, 2006**  
**Secretary of State**

DOCUMENT# 759655

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

**Current Principal Place of Business:**

30 SW SOUTH RIVER DRIVE  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

30 SW SOUTH RIVER DRIVE  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 59-2142504      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORNETT, JANE P.A.  
401 E. OSCEOLA STREET  
STUART, FL 34994    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: OZOLS, GUNARS M  
Address: 61 SW SOUTH RIVER DRIVE, #201  
City-St-Zip: STUART, FL 34997

Title: VPD            ( ) Delete  
Name: GEBHARDT, HANS J  
Address: 241 SW SOUTH RIVER DRIVE, #203  
City-St-Zip: STUART, FL 34997

Title: SD            ( ) Delete  
Name: WELCH, PAULINE R  
Address: 151 SW SOUTH RIVER DRIVE, #105  
City-St-Zip: STUART, FL 34997

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

Title: D            ( ) Delete  
Name: GRAU, FREDERICK W  
Address: 241 SW SOUTH RIVER DRIVE, #207  
City-St-Zip: STUART, FL 34997

Title:            ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

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

Title: D            ( ) Change (X) Addition  
Name: LIONE, ROSEMARY  
Address: 91 SW SOUTH RIVER DRIVE, #106  
City-St-Zip: STUART, FL 34997

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

04/02/2006

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

\_\_\_\_\_  
Date