

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768590

FILED
Apr 27, 2009
Secretary of State

Entity Name: SUGAR MILL THREE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6015 MORROW ST E
STE 107
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

6015 MORROW ST E
STE 107
JACKSONVILLE, FL 32217 US

New Mailing Address:

FEI Number: 59-2357786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANNING MANAGEMENT, INC.
6015 MORROW STREET E, SUITE 107
JACKSONVILLE, FL 32217 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: FITZGERALD, TOMMA
Address: 3801 CROWN POINT RD #3083
City-St-Zip: JACKSONVILLE, FL 32257

Title: ST () Delete
Name: MCCOYNELL, KATHY
Address: 3801 CROWN PT RD
City-St-Zip: JACKSONVILLE, FL 32257

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HALL, DANIEL
Address: 3801 CROWN POINT RD #3093
City-St-Zip: JACKSONVILLE, FL 32257

Title: ST (X) Change () Addition
Name: MCCONNELL, KATHY
Address: 3801 CROWN PT RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: DST () Change (X) Addition
Name: FITZGERALD, TOMMA
Address: 3801 CROWN POINT RD 3083
City-St-Zip: JACKSONVILLE, FL 32257

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: DANIEL HALL

PD

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date