

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769727

FILED
Jan 16, 2006
Secretary of State

Entity Name: S. V. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

201 ESPLANADE WAY
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

201 ESPLANADE WAY
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-2882833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREYSTONE MANAGEMENT COMPANY
1950 LEE ROAD
SUITE 212
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

FRY, PATRICIA VP
201 ESPLANADE WAY
CASSELBERRY, FL 32707 US

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: PATRICIA FRY

01/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SKIDMORE, HANK
Address: 230 EVEREST PT #104
City-St-Zip: CASSELBERRY, FL 32707

Title: SD () Delete
Name: WEAVER, PAM
Address: 540 CASCADE CIR., #102
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: VELAZQUEZ, LETTY
Address: 237 MONT BLANC CT., #705
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: BROOKBY, ANN
Address: 546 CASCADE #100
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: HOFF, LORRAINE
Address: 236 MONT BLANC, # 102
City-St-Zip: CASSELBERRY, FL

Title: VP () Delete
Name: LIPPOLDT, CHARLES
Address: 532 CASCADE CIR #100
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FRY, PATRICIA
Address: 566 CASCADE CIR #106
City-St-Zip: CASSELBERRY, FL 32707

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

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

Title: D (X) Change () Addition
Name: ALLEN, EDD
Address: 568 CASCADE CIR #104
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Change () Addition
Name: LIPPOLDT, CHARLES
Address: 532 CASCADE CIR #100
City-St-Zip: CASSELBERRY, FL 32707

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: HANK SKIDMORE

P

01/16/2006

Electronic Signature of Signing Officer or Director

Date