

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006098

FILED
Apr 07, 2009
Secretary of State

Entity Name: SOUTHCHASE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

4003 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3670163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRYAN K
C/O SIGNATURE REALTY & MANAGEMENT, INC.
4003 HARTLEY RD
JACKSONVILLE, FL 32257 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: D () Delete
Name: BAILEY, ROBERT
Address: 11110 CHASE MEADOWS DR. S.
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: STEWART, EARNEST
Address: 7932 CHASE MEADOWS DR E
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: WEST, DAVID
Address: 7810 CHASE MEADOWS DR W
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BAILEY, ROBERT
Address: 11110 CHASE MEADOWS DR. S.
City-St-Zip: JACKSONVILLE, FL 32256

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

Title: D (X) Change () Addition
Name: SIMS, LETITIA
Address: 11442 CHASE MEADOWS DR S
City-St-Zip: JACKSONVILLE, FL 32256

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: ROBERT E. BAILEY

DP

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date