2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006378

Entity Name: SOUTHWOOD COMMUNITY COUNCIL, INC.

FILED Apr 22, 2005 Secretary of State

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

215 SOUTH MONROE STREET 3800 ESPLANADE WAY SUITE 702 SUITE 100

TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32311

Current Mailing Address: New Mailing Address:

245 RIVERSIDE AVENUE 245 RIVERSIDE AVENUE

SUITE 500 - ATTN. LEGAL DEPT. JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

FEI Number: 59-3709222 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:

MARX, CHRISTINE M 245 RIVERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 32202 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:

Cleater in Circumstance of Devictors of American

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 $\begin{tabular}{lll} PD & (\) Delete & Title: & PD & (X) Change \ (\) Addition \end{tabular}$

Name: EDMOND, TIMOTHY D Name: DRURY, CHRISTOPHER J

Address: 215 S MONROE STREET SUITE 702 Address: 3255 HEMINGWAY BLVD City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32311

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

 Name:
 DANTIN, J. KEITH
 Name:
 DANTIN, J. KEITH

 Address:
 215 S MONROE STREET SUITE 702
 Address:
 3800 ESPLANADE WAY

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 TALLAHASSEE, FL 32311

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

Name: TEAL, DAVID Name: FREY, BILL

Address: 5010 SOUTHWOOD PLANTATION RD Address: 3800 ESPLANADE WAY
City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: TALLAHASSEE, FL 32311

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BILL FREY S 04/22/2005