

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008537

FILED
Feb 12, 2009
Secretary of State

Entity Name: SORRENTO VILLAGE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

43 SORRENTO CT.
SATELITE BEACH, FL 32937

New Principal Place of Business:

43 SORRENTO CT.
SATELLITE BEACH, FL 32937

Current Mailing Address:

43 SORRENTO CT.
SATELITE BEACH, FL 32937

New Mailing Address:

43 SORRENTO CT.
SATELLITE BEACH, FL 32937

FEI Number: 03-0492291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERARO, NICHOLAS D
39 SORRENTO CT
SATELLITE BEACH, FL 32937 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: P () Delete
Name: HUGHES, PATRICK
Address: 65 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: V () Delete
Name: ROBERTS, EVA
Address: 49 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T () Delete
Name: CALDERARO, NICHOLAS D
Address: 39 SORRENTO CT.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S () Delete
Name: SELLS, KATHLEEN
Address: 51 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: BM () Delete
Name: HOPE, GEORGE
Address: 63 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTS, EVA
Address: 49 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: V (X) Change () Addition
Name: HUGHES, PATRICK
Address: 65 SORRENTO CT
City-St-Zip: SATELLITE BEACH, FL 32937

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

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

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

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: NICHOLAS D. CALDERARO

T

02/12/2009

Electronic Signature of Signing Officer or Director

Date