

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 07, 2009
Secretary of State**

DOCUMENT# N03000002191

Entity Name: SOUTH SHORE OAKS SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11172 SHORE DRIVE
LAKE WALES, FL 33898

New Principal Place of Business:

Current Mailing Address:

11172 SHORE DRIVE
LAKE WALES, FL 33898

New Mailing Address:

FEI Number: 56-2329597 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ
2424 BUCKHORN RUN DR
VALRICO, FL 33594 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: VD () Delete
Name: ROSIER, B C
Address: 11172 SHORE DRIVE
City-St-Zip: LAKE WALES, FL 33898

Title: S () Delete
Name: WHITMAN, GLORIA
Address: 22045 ST. CLOUD AVE.
City-St-Zip: VALRICO, FL 33594

Title: PDC () Delete
Name: WHITMAN, JAMES A
Address: 2204 S. SAINT CLOUD AVE.
City-St-Zip: VALRICO, FL 335944762

Title: D () Delete
Name: COLBERT, RONALD P
Address: 111 LOCUST DR
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: ROSIER, PAMELA T
Address: 11172 SHORE DRIVE
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: B C ROSIER

Electronic Signature of Signing Officer or Director

D

03/07/2009

Date