

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002253

FILED
Jan 07, 2009
Secretary of State

Entity Name: SOUTHPOINT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 51145
JACKSONVILLE BEACH, FL 32240 US

New Principal Place of Business:

6817 SOUTHPOINT PARKWAY
JACKSONVILLE, FL 32216 US

Current Mailing Address:

PO BOX 51145
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

P O BOX 330052
ATLANTIC BEACH, FL 32233 US

FEI Number: 80-0080366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREITBART, JERRE
2279 SEMINOLE RD 6
ATLANTIC BEACH, FL 32233 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: VPD () Delete
Name: AKERS, JIM
Address: 6817 SOUTH POINT PKWY 1304
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: BREITBART, JERRE
Address: 2279 SEMINOLE RD #6
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: TD () Delete
Name: BALDWIN, GARRETT
Address: 6817 SOUTHPOINT PKWY 901
City-St-Zip: JACKSONVILLE, FL 32216

Title: D () Delete
Name: FARRELL, STEPHEN
Address: 821 BONAIRE CIR
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: RANKIN, GENE
Address: 6817 SOUTHPOINT PKWY STE 803
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AKERS, JIM
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Change () Addition
Name: BREITBART, JERRE
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VPD (X) Change () Addition
Name: BALDWIN, GARRETT
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: TD (X) Change () Addition
Name: FARRELL, STEPHEN
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SD (X) Change () Addition
Name: RANKIN, GENE
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

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: JERRE BREITBART

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date