

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002253

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: SOUTHPPOINT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 51145  
JACKSONVILLE BEACH, FL 32240 US

**New Principal Place of Business:**

6817 SOUTHPPOINT 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 SOUTHPPOINT 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 SOUTHPPOINT 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