

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002428

FILED
Jun 22, 2009
Secretary of State

Entity Name: NEW SINGELTARY SCATTERED SITES PARTNERS, INC.

Current Principal Place of Business:

1307 6TH ST W
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

1307 6TH ST W
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 20-0896765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WASHINGTON, LYNN C
701 BRICKELL AVE, STE 2800
C/O HOLLAND & KNIGHT
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

WASHINGTON, LYNN C
3301 N.E. 1ST AVENUE.
4 MIDTOWN, SUITE 501
MIAMI, FL 33137 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: _____

06/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: DESUE, WENSTON
Address: 1307 6TH ST W
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: CLAYTON, LANCE
Address: 1307 6TH ST W
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: ROBERSON, MICHAEL
Address: 1307 6TH ST W
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BRANCH, DARCY
Address: 1307 6TH ST W
City-St-Zip: BRADENTON, FL 34205

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: LYNN C. WASHINGTON

RA

06/22/2009

Electronic Signature of Signing Officer or Director

Date