

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003692

FILED
Feb 17, 2009
Secretary of State

Entity Name: SCP CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

740 752 756 COMMERCE DR
VENICE, FL 34292

New Principal Place of Business:

740 752 756 COMMERCE DR
VENICE, FL 34292 US

Current Mailing Address:

2055 WOOD ST STE 202
SARASOTA, FL 34237 US

New Mailing Address:

PO BOX 2879
SARASOTA, FL 34230 US

FEI Number: 87-0704843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON KLING, RENEE
2055 WOOD ST STE 202
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

KLING, RENEE R
1530 DOLPHIN STREET
SUITE 4
SARASOTA, FL 34236 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: RENEE RICHARDSON KLING

02/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDERLIE, LUCY
Address: 752 COMMERCE DR 15
City-St-Zip: VENICE, FL 34292

Title: DST () Delete
Name: GONDELA, DOUG
Address: 752 COMMERCE DR #9
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: GONDELA, KIM
Address: 752 COMMERCE DR 9
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: WEBBER, KEN
Address: 315 SEA ANCHOR DR.
City-St-Zip: OSPREY, FL 34228

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: DOUG GONDELA

DST

02/17/2009

Electronic Signature of Signing Officer or Director

Date