2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2012
Secretary of State

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Entity Name: SOUTHERN PINES OF OSCEOLA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

241 RUBY AVENUE
KISSIMMEE, FL 34741 US

New Principal Place of Business:

811 MABBETTE STREET
KISSIMMEE, FL 34741 US

Current Mailing Address:

241 RUBY AVENUE
KISSIMMEE, FL 34741 US

New Mailing Address:

811 MABBETTE STREET
KISSIMMEE, FL 34741 US

FEI Number: 20-0280389 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC.
241 RUBY AVENUE
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC.
811 MABBETTE STREET
KISSIMMEE, FL 34741 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: MARK HILLS 03/08/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP
Name: JOYCE, PAMELA
Address: 5070 PLYMOUTH TURTLE CIRCLE
City-St-Zip: ST. CLOUD, FL 34772 US

Title: DVP
Name: RICHARDSON, TONY L
Address: 5321 SILVER THISTLE LANE
City-St-Zip: ST. CLOUD, FL 34772 US

Title: DST
Name: ENBERG, JASON
Address: 4610 SALAMANDER STREET
City-St-Zip: ST. CLOUD, FL 34772 US

I hereby 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 all other like empowered.

SIGNATURE: MARK HILLS RA 03/08/2012
Electronic Signature of Signing Officer or Director Date