## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010300

FILED Jul 05, 2006 Secretary of State

Entity Name: SOUTHBACK TWO HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2809 OCEAN DRIVE SOUTH 4213 C.R. 218

JACKSONVILLE BEACH, FL 32250 US SUITE 1

MIDDLEBURG, FL 32068 US

Current Mailing Address: New Mailing Address:

2809 OCEAN DRIVE SOUTH P.O. BOX 949

JACKSONVILLE BEACH, FL 32250 US MIDDLEBURG, FL 32050 US

FEI Number: 32-0104453 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

SENHART, NECDET DELCOMYN, VINA C CAM

2809 OCEAN DRIVE SOUTH 4213 C.R. 218

JACKSONVILLE BEACH, FL 32250 US SUITE 1
MIDDLEBURG, FL 32068 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: VINA C. DELCOMYN 07/05/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 SEHNART, NECDET
 Name:
 TOMKOVITCH, JOHN

 Address:
 2809 OCEAN DRIVE SOUTH
 Address:
 3620 NIPA DRIVE

City-St-Zip: JACKSONVILLE BEACH, FL 32250 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: EDGINGTON, WILLIAM L Name: COSTA, JAMES

Address: 2809 OCEAN DRIVE SOUTH Address: 3737 SOUTHBANK CIRCLE

City-St-Zip: JACKSONVILLE BEACH, FL 32250 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

 Name:
 POLNOI, NIPA
 Name:
 DELISI, CARMELO

 Address:
 2809 OCENA DRIVE SOUTH
 Address:
 3611 NIPA DRIVE

City-St-Zip: JACKSONVILLE BEACH, FL 32250 US City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN TOMKOVITCH P 07/05/2006