

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003742

FILED
Apr 10, 2008
Secretary of State

Entity Name: SOUTH END NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

339 ALHAMBRA
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

PO BOX 7531
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 20-2466308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, SETH
308 NOTTINGHAM BLVD
WEST PALM BEACH, FL 33405 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: D () Delete
Name: SCHWARTZ, SETH
Address: 308 NOTTINGHAM BLVD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: MATERIO, SHANON
Address: 339 ALHAMBRA
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: MOORE, DON
Address: 242 BLOOMFIELD DR
City-St-Zip: WEST PALM BEACH, FL 33405

Title: SD (X) Delete
Name: MATERIO, SHANON
Address: 339 ALHAMBRA PL
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D (X) Delete
Name: PARMENTER, ANDREA W
Address: 424 COLONIAL
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D (X) Delete
Name: KOONS, CAROLINE
Address: 311 MURRAY RD
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHWARTZ, SETH
Address: PO BOX 7531
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D (X) Change () Addition
Name: FISCHER, JEFF
Address: PO BOX 7531
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D (X) Change () Addition
Name: LEVINE, GAIL
Address: PO BOX 7531
City-St-Zip: WEST PALM BEACH, FL 33405

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

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

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

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: SETHDSCHWARTZ

D

04/10/2008

Electronic Signature of Signing Officer or Director

Date