## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005253

Entity Name: SOL Y MAR CONDOMINIUM ASSOCIATION, INC.

**FILED** Feb 10, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1431 SOUTH ATLANTIC AVE COCOA BEACH, FL 32931

**Current Mailing Address: New Mailing Address:** 

200 NORTH FIRST STREET P. O. BOX 510842

COCOA BEACH, FL 32931 MELBOURNE BEACH, FL 32951

FEI Number: 34-1998284 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIGERMAN, MARILYN A O'BRIAN, NANCY DP 200 NORTH FIRST STREET 1431 SOUTH ATLANTIC AVE. US COCOA BEACH, FL 32931 #301

COCOA BEACH, FL 32931 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: NANCY O'BRIAN 02/10/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DVP (X) Change ( ) Addition () Delete STOBAUGH, CAROLYN STOBAUGH, CAROLYN DST Name: Name: 800 SOUTH DAKOTA AVE., SUITE 426 Address: 777 N. ASHLEY DRIVE #1403 Address:

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33602 US

Title: ( ) Delete Title:

(X) Change ( ) Addition CONNERY, DENISE PHILLIPS, ROBIN D Name: Name: Address: 1431 S. ATLANTIC AVE., #304 Address: 685 UPLAND HILLS DRIVE City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: CHELSEA, MD 48118 US

Title: DP () Delete Title: (X) Change ( ) Addition O'BRIAN, NANCY Name: O'BRIAN, NANCY DP Name: 1431 S ATLANTIC AVE 1431 S ATLANTIC AVE #301 Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 US

Title: DST () Delete Title: DVP (X) Change ( ) Addition Name: O'BRIAN, TOM Name: ROMANO, BARBARA DVP 1431 S ATLANTIC AVE Address: Address: 1431 S ATLANTIC AVE #302 City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 US

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

ROMANO, SALLIE D Name: Name: 363 WASHINGTON AVE Address: Address: City-St-Zip: City-St-Zip: CLARKSBURG, WV 26301 US

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: NANCY O'BRIAN DP 02/10/2009