

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010916

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** SOUTHERN PASSAGES: THE ATLANTIC HERITAGE COAST, INC.

**Current Principal Place of Business:**

719 SOUTH WOODLAND BLVD., MS 1-501  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

719 SOUTH WOODLAND BLVD., MS 4-501  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 84-1650632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BALOGH, GARRY  
719 SOUTH WOODLAND BLVD., MS 1-501  
DELAND, FL 32720 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: PD  
Name: MARTIN, VERNON  
Address: 206 WYMBERLY ROAD  
City-St-Zip: ST. SIMONS ISLAND, GA 31522

Title: TD  
Name: BALOGH, GARRY  
Address: 719 SOUTH WOODLAND BLVD., MS 4-501  
City-St-Zip: DELAND, FL 32720

Title: VD  
Name: WRIGHT, BERNIE  
Address: 1215 PERRY DR.  
City-St-Zip: ORANGEBURG, SC 29116

Title: SD  
Name: BASS, JAN  
Address: 85 RICHARD R DAVIS DR  
City-St-Zip: RICHMOND HILL, GA 31324

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: GARRY BALOGH

TD

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date