## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000000368

FILED Mar 15, 2009 Secretary of State

Entity Name: 1301 SOHO CONDOMINIUM ASSOCIATION, INC.

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

2870 SCHERER LN 100 2870 SCHERER DRIVE

SAINT PETERSBURG, FL 33716 100

SAINT PETERSBURG, FL 33716

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

2870 SCHERER DRIVE 2870 SCHERER LN 100

SAINT PETERSBURG, FL 33716

SAINT PETERSBURG, FL 33716

FEI Number: 01-0827582 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:

COTTERILL, RON 1010 N FLORIDA AVE TAMPA, FL 33602

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:

Name:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

BENSON, JULIE V BENSON, JULIE V Name: Name: 1301 S HOWARD AVE Address: 1301 S HOWARD AVE, A22 Address:

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

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

KIRKBRIDE, TASMIN Name: KIRKBRIDE, TASMIN Name: Address: 1301 S HOWARD AVE C6 Address: 1301 S HOWARD AVE C6 City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

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

HUBBARD, BARRY HUBBARD, BARRY Name: Name: 1301 SO HOWARD A-2 Address: Address: 1301 SO HOWARD A2 City-St-Zip: TAMPA, FL 33604 City-St-Zip: TAMPA, FL 33604

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

DEVLIN, ELIZABETH Name: Address: 506 SO. MELVILLE AVE Address: City-St-Zip: TAMPA, FL 33606 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: MAUREEN CONNOLLY MGR 03/15/2009