

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005923

FILED
Jan 07, 2009
Secretary of State

Entity Name: SOUTHLAKE OFFICE CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 51145
JACKSONVILLE BEACH, FL 32240

New Principal Place of Business:

2279 SEMINOLE ROAD
6
ATLANTIC BEACH, FL 32233

Current Mailing Address:

PO BOX 51145
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

P O BOX 330052
ATLANTIC BEACH, FL 32233

FEI Number: 20-3005860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BREITBART, JERRE
2279 SEMINOLE RD #6
ATLANTIC BEACH, FL 32233 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: DP () Delete
Name: HALL, III, PIKE
Address: P.O. BOX 3153
City-St-Zip: POINTE VERDA BEACH, FL 32004

Title: DVP () Delete
Name: TOWERS, JR., W.B.
Address: 6215 WILSON BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: DST () Delete
Name: TOWERS, JOHN
Address: 6215 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: BREITBART, JERRE
Address: PO BOX 51145
City-St-Zip: JACKSONVILLE BEACH, FL 32240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HALL, III, PIKE
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DVP (X) Change () Addition
Name: O'CONNOR, MARK
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Change () Addition
Name: KALUZA, PIOTR
Address: P O BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Change () Addition
Name: BREITBART, JERRE
Address: PO BOX 330052
City-St-Zip: ATLANTIC BEACH, FL 32233

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: JERRE BREITBART

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date