

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011059

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** SOPCHOPPY PRESERVATION AND IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

175 GERTIE BROWN ROAD  
SOPCHOPPY, FL 32358

**New Principal Place of Business:**

175 GERTIE BROWN RD.  
SOPCHOPPY, FL 32358

**Current Mailing Address:**

PO BOX 272  
SOPCHOPPY, FL 32358

**New Mailing Address:**

**FEI Number:** 20-3745121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOWRIE, BILL  
175 GERTIE BROWN ROAD  
SOPCHOPPY, FL 32358 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: PRES  
Name: LOWRIE, BILL  
Address: 175 GERTIE BROWN RD.  
City-St-Zip: SOPCHOPPY, FL 32358

Title: VPD  
Name: JORDAN, CYNTHIA S  
Address: 3301 ADDISON LANE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD  
Name: FLYNN, DANNY  
Address: 77 GERTIE BROWN ROAD  
City-St-Zip: SOPCHOPPY, FL 32358

Title: SD  
Name: MARTIN, NELSON  
Address: 60 LIZARD LANE  
City-St-Zip: SOPCHOPPY, FL 32358

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: THEODORE W. LOWRIE

PRES

02/16/2010

Electronic Signature of Signing Officer or Director

Date