

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011571

FILED
Jan 17, 2007
Secretary of State

Entity Name: SOUTH HAMPTON TOWNSUITES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8638 PHILIPS HWY STE 3
JACKSONVILLE, FL 32256

New Principal Place of Business:

11512 LAKE MEAD AVENUE
SUITE 303
JACKSONVILLE, FL 32256

Current Mailing Address:

8638 PHILIPS HWY STE 3
JACKSONVILLE, FL 32256

New Mailing Address:

11512 LAKE MEAD AVENUE
SUITE 303
JACKSONVILLE, FL 32256

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PATTERSON, GUY R
8638 PHILIPS HWY STE 3
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

PATTERSON, GUY R
11512 LAKE MEAD AVENUE
SUITE 303
JACKSONVILLE, FL 32256 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: GUY R. PATTERSON

01/17/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: DONZIGER, MICHAEL J
Address: 8638 PHILIPS HWY STE 3
City-St-Zip: JACKSONVILLE, FL 32256

Title: DVS () Delete
Name: PATTERSON, GUY R
Address: 10920 BAYMEADOWS RD STE 27-206
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: DAVIS, MARY A
Address: 10920 BAYMEADOWS RD STE 27-206
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: PATTERSON, GUY R
Address: 11512 LAKE MEAD AVENUE SUITE 303
City-St-Zip: JACKSONVILLE, FL 32256

Title: DVS (X) Change () Addition
Name: ROGOVE, ARTHUR
Address: 159-4 HAMPTON POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: D (X) Change () Addition
Name: HATCHER, MARC
Address: 159-1 HAMPTON POINT DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the 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: GUY R. PATTERSON

DPT

01/17/2007

Electronic Signature of Signing Officer or Director

Date