2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011852

FILED Feb 11, 2009 Secretary of State

Entity Name: SPYGLASS SOUTH CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
PYGLAS	8059 8061 S HILL ROAD RNE, FL 32940			
Current Mailing Address:		New Mailing Address:		
TE. 108	EAPPLE AVE. RNE, FL 32935			
El Number	: 20-3862565	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:		
MIDENLI				
425 PINE	ESTATE, INC. EAPPLE AVE., S RNE, FL 32935			
425 PINE IELBOUF he above	EAPPLE ÁVE., (RNE, FL 32935	US	purpose of changing its registere	ed office or registered agent, or both,
425 PINE IELBOUF he above the State	EAPPLE ÁVE., \$ RNE, FL 32935 named entity s of Florida. RE:	US submits this statement for the		ed office or registered agent, or both,
425 PINE IELBOUF he above i the State	EAPPLE ÁVE., \$ RNE, FL 32935 named entity se of Florida. RE: Electron	US submits this statement for the statement for	ent	Date
425 PINE IELBOUF he above i the State	EAPPLE ÁVE., \$ RNE, FL 32935 named entity s of Florida. RE:	US submits this statement for the statement for	ent	
425 PINE IELBOUF he above i the State IGNATUI	EAPPLE ÁVE., SRNE, FL 32935 e named entity se of Florida. RE: Electron S AND DIREC	submits this statement for the submits this statement for the sic Signature of Registered Agronal TORS: Delete BARRY F RD PLACE	ent	Date
#25 PINE ELBOUF The above the State GNATUI FFICER: ame: Idress:	EAPPLE ÁVE., SRNE, FL 32935 e named entity se of Florida. RE: Electron S AND DIRECT D () RICHARDSON, 931 STRATFOR MELBOURNE, F	ic Signature of Registered Ag TORS: Delete BARRY F ED PLACE FL 32940 Delete K A DR.	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: BARRY RICHARDSON D 02/11/2009