

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006639

FILED
Apr 30, 2009
Secretary of State

Entity Name: SOUTHERN COURTYARD TOWN HOMES ASSOCIATION, INC.

Current Principal Place of Business:

2016 S 10TH STREET
FT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

2016 S 10TH STREET
FT PIERCE, FL 34950

New Mailing Address:

FEI Number: 20-5173732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, HOWARD A
1 FINANCIAL PLAZA SUITE 1400
100 SE 3RD AVE
FT LAUDERDALE, FL 333940030 US

Name and Address of New Registered Agent:

JAMES, MCCARTY H ESQ
926 NW 13TH ST.
GAINESVILLE, FL 326014140 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: JAMES H MCCARTHY JR.

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: GUTTA, FRANK
Address: 8211 W BROWARD BLVD SUITE 350
City-St-Zip: PLANTATION, FL 33324

Title: DP () Delete
Name: GRIECO, NANCY
Address: 909 W MIDWAY RD
City-St-Zip: FT PIERCE, FL 34982

Title: DS () Delete
Name: KOUTOULAS, GREGORY
Address: 8211 W BROWARD BLVD SUITE 350
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: NANCY A GRIECO

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date