

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008531

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** ONE ST. GEORGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1136 MCCOOK RD  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

1136 MCCOOK RD  
QUINCY, FL 32351

**New Mailing Address:**

**FEI Number:** 26-1756177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, GERALD W  
1136 MCCOOK RD  
QUINCY, FL 32351 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: D ( ) Delete  
Name: MATHEWS, MATT  
Address: 277 PINWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete  
Name: THOMPSON, GERALD W  
Address: 1136 MCCOOK RD  
City-St-Zip: QUINCY, FL 32351

Title: D ( ) Delete  
Name: SUBER, GREG  
Address: 407 E KING ST  
City-St-Zip: QUINCY, FL 32351

Title: DPVS ( ) Delete  
Name: THOMPSON, GERALD W  
Address: 1136 MCCOOK ROAD  
City-St-Zip: QUINCY, FL 32351

**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:

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: GERALD W. THOMPSON

DIR

02/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date