2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N06000010416

Entity Name: THE SANCTUARY HOMEOWNERS' ASSOCIATION OF MONTICELLO, INC.

Current Principal Place of Business:

2618 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

New Principal Place of Business:

2878 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

Current Mailing Address:

2618 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

New Mailing Address:

2878 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

FEI Number: 20-5677711 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAWS, SONYA K
2618 CENTENNIAL PLACE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

DAWS, SONYA K
2878 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308 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: SONYA K. DAWS 02/04/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARD, WILLIAM J
Address: 6001 VETERANS MEMORIAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: STD ( ) Delete
Name: ARD, LISA C
Address: 6001 VETERANS MEMORIAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete
Name: DAWS, SONYA K
Address: 2618 CENTENNIAL PLACE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: DAWS, SONYA K
Address: 2878 REMINGTON GREEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

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: WILLIAM J. ARD PD 02/04/2009
Electronic Signature of Signing Officer or Director Date