

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011772

FILED
Jul 13, 2007
Secretary of State

Entity Name: SOCK ENTERPRISES, INC., A CONDOMINIUM

Current Principal Place of Business:

2497 15TH STREET
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2497 15TH STREET
SARASOTA, FL 34237

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ONEY, FLOYD
2497 15TH STREET
SARASOTA, FL 34237 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ONEY, FLOYD
Address: 2497 15TH STREET
City-St-Zip: SARASOTA, FL 34237

Title: DV () Delete
Name: KELLER, JOHN
Address: 2483 15TH STREET
City-St-Zip: SARASOTA, FL 34237

Title: DS () Delete
Name: TURNER, JASPER G
Address: 2491 15TH STREET
City-St-Zip: SARASOTA, FL 34237

Title: DT () Delete
Name: SANDT, PETER
Address: 2497 15TH STREET
City-St-Zip: SARASOTA, FL 34237

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: FLOYD ONEY

DP

07/13/2007

Electronic Signature of Signing Officer or Director

Date