

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06699

FILED  
Jul 02, 2009  
Secretary of State

**Entity Name:** FOURTEENTH STREET PROFESSIONAL PLAZA ASSOCIATION, INC.

**Current Principal Place of Business:**

1411 S. 14TH STREET  
SUITE F  
FERNANDINA BEACH, FL 32034 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SUN GROUP PROPERTIES, INC.  
P.O. BOX 6132  
FERNANDINA BEACH, FL 320356132 US

**New Mailing Address:**

FEI Number: 59-2621197      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

RIDLEY, FRANK M  
1864 ATLANTIC PL  
AMELIA ISLAND, FL 320345820 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: D ( ) Delete  
Name: SHELLY-LOHMAN, PATTY AU.D.  
Address: 961146 BUCCANEER TRAIL  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D ( ) Delete  
Name: CRUMP, JAY O.D.  
Address: 562 HIRTH RD  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PTSD ( ) Delete  
Name: LOHMAN, TERRANCE E  
Address: 961146 BUCRANSER TRAIL  
City-St-Zip: AUSLIA ISLAND, FL 32036

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: PTSD (X) Change ( ) Addition  
Name: LOHMAN, TERRANCE E  
Address: 961146 BUCCANEER TRAIL  
City-St-Zip: AMELIA ISLAND, FL 32034

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: FRANK M. RIDLEY

MGR

07/02/2009

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

\_\_\_\_\_  
Date