2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2009
Secretary of State

DOCUMENT# N06963

Entity Name: SOUTHWOOD HICKORY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O 3641 S.W. 25TH PLACE
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

C/O 3641 S.W. 25TH PLACE
OCALA, FL 34474

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

FEENEY, ROBERT M II
3641 S.W. 25TH PLACE
OCALA, FL 34474 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:	PD	( ) Delete
Name:	FEENEY, ROBERT M	
Address:	277 NAWTHIUS WAY	
City-St-Zip:	SAINT PETERSBURG, FL 33706	
Title:	TM	( ) Delete
Name:	FEENEY, ROBERT M II	
Address:	3641 S.W. 25TH PLACE	
City-St-Zip:	OCALA, FL 34474	
Title:	S	( ) Delete
Name:	CLARK, DANA	
Address:	3641 S.W. 25TH PL.	
City-St-Zip:	OCALA, FL	
Title:	VD	( ) Delete
Name:	LIVINGSTON, JOHN	
Address:	2809-C S.E. 7TH AVENUE	
City-St-Zip:	OCALA, FL 34471	

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: ROBERT M FEENEY MR 08/31/2009
Electronic Signature of Signing Officer or Director — Date