

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06963

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**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 ( )**

**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  
Name: FEENEY, ROBERT M  
Address: 277 NAUTLIS WAY  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: TM  
Name: FEENEY, ROBERT M II  
Address: 3641 S.W. 25TH PLACE  
City-St-Zip: OCALA, FL 34474

Title: S  
Name: CLARK, DANA  
Address: 3641 S.W. 25TH PL.  
City-St-Zip: OCALA, FL

Title: VD  
Name: LIVINGSTON, JOHN  
Address: 2809-C S.E. 7TH AVENUE  
City-St-Zip: OCALA, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: ROBERT M FEENEY

MR.

01/06/2010

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

\_\_\_\_\_  
Date