

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007504

FILED  
Feb 12, 2009  
Secretary of State

**Entity Name:** THUNDERBIRD HILL SOUTH UNIT II HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

116 SUNBIRD CT.  
SEBRING, FL 33872

**New Principal Place of Business:**

1129 SUNBIRD COURT  
SEBRING, FL 33872

**Current Mailing Address:**

116 SUNBIRD CT.  
SEBRING, FL 33872

**New Mailing Address:**

1129 SUNBIRD COURT  
SEBRING, FL 33872

**FEI Number:** 01-0580160

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RITENOUR, LAMAR  
116 SUNBIRD CT.  
SEBRING, FL 33872 US

**Name and Address of New Registered Agent:**

SANBORN, SANDY  
1129 SUNBIRD COURT  
SEBRING, FL 33872 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: SANDY SANBORN

02/12/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RITENOUR, LAMAR  
Address: 116 SUNBIRD CT.  
City-St-Zip: SEBRING, FL 33872

Title: DV ( ) Delete  
Name: SANBORN, SANDY  
Address: 1129 SUNBIRD COURT  
City-St-Zip: SEBRING, FL 33872

Title: DS ( ) Delete  
Name: JOANNE, NULL  
Address: 105 SUNBIRD PLACE  
City-St-Zip: SEBRING, FL 33972

Title: DT ( ) Delete  
Name: HOUK, SHARON  
Address: 1012 SUNBIRD CT.  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: TODD, BARBARA  
Address: 1114 SUNBIRD CT.  
City-St-Zip: SEBRING, FL 33872

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

Title: DP (X) Change ( ) Addition  
Name: SANBORN, SANDY  
Address: 1129 SUNBIRD COURT  
City-St-Zip: SEBRING, FL 33872

Title: DV (X) Change ( ) Addition  
Name: RITENOUR, LAMAR  
Address: 1116 SUNBIRD COURT  
City-St-Zip: SEBRING, FL 33872

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: JOANNE NULL

DS

02/12/2009

Electronic Signature of Signing Officer or Director

Date