

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008352

FILED
Apr 21, 2009
Secretary of State

Entity Name: SOLDIERS CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1444 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Principal Place of Business:

115 TIMBERLACHEN CIRCLE
SUITE 1005
LAKE MARY, FL 32746

Current Mailing Address:

1444 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Mailing Address:

115 TIMBERLACHEN CIRCLE
SUITE 1005
LAKE MARY, FL 32746

FEI Number: 61-1539573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAKI, KURBAN
1444 LEXINGTON GREEN LANE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

KHAKI, KURBAN
3287 SAFE HARBOR LANE
LAKE MARY, FL 32746 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:

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KHAKI, KURBAN
Address: 1444 LEXINGTON GREEN LANE
City-St-Zip: SANFORD, FL 32771

Title: STD () Delete
Name: MANJI, AZIM
Address: 1444 LEXINGTON GREEN LANE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: BHARWANI, WAHEEDA
Address: 1444 LEXINGTON GREEN LANE
City-St-Zip: SANFORD, FL 32771

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KHAKI, KURBAN
Address: 3287 SAFE HARBOR LANE
City-St-Zip: LAKE MARY, FL 32746

Title: STD (X) Change () Addition
Name: MANJI, AZIM
Address: 115 TIMBERLACHEN CIRCLE, STE 1005
City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Change () Addition
Name: BHARWANI, WAHEEDA
Address: 115 TIMBERLACHEN CIRCLE, STE 1005
City-St-Zip: LAKE MARY, FL 32746

Title: D () Change (X) Addition
Name: MAURER, KEN
Address: P O BOX 622064
City-St-Zip: OVIEDO, FL 32762

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: AZIM MANJI

STD

04/21/2009

Electronic Signature of Signing Officer or Director

Date