

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008352

FILED  
Apr 22, 2010  
Secretary of State

**Entity Name:** SOLDIERS CREEK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

115 TIMBERLACHEN CIRCLE  
SUITE 1005  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

115 TIMBERLACHEN CIRCLE  
SUITE 1005  
LAKE MARY, FL 32746

**New Mailing Address:**

**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  
3287 SAFE HARBOR LANE  
LAKE MARY, FL 32746 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: KHAKI, KURBAN  
Address: 3287 SAFE HARBOR LANE  
City-St-Zip: LAKE MARY, FL 32746

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

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

Title: D  
Name: MAURER, KEN  
Address: P O BOX 622064  
City-St-Zip: OVIEDO, FL 32762

Title: D  
Name: MARK, HENDERSON  
Address: 2100 RONALD REAGAN, SUITE 1012  
City-St-Zip: LONGWOOD, FL 32750

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: AZIM MANJI

STD

04/22/2010

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

\_\_\_\_\_  
Date