

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000066

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: SHERMAN AVENUE OWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

404 JENKS AVENUE  
PANANA CITY, FL 32401

## New Principal Place of Business:

1726 FRANKFORD AVE.  
PANANA CITY, FL 32405

## Current Mailing Address:

404 JENKS AVENUE  
PANANA CITY, FL 32401

## New Mailing Address:

1726 FRANKFORD AVE.  
PANANA CITY, FL 32405

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BONNEY, GARTH D  
404 JENKS AVENUE  
PANAMA CITY, FL 32401 US

## Name and Address of New Registered Agent:

BONNEY, GARTH D  
436 MCKENZIE AVE.  
PANAMA CITY, FL 32401 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: GARTH BONNEY

04/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: NEWMANS, HOWARD  
Address: 1726 FRANKFORD AVENUE  
City-St-Zip: PANAMA CITY, FL 32405

Title: PD ( ) Delete  
Name: NEWMANS, WOODROW  
Address: 1726 FRANKFORD AVENUE  
City-St-Zip: PANAMA CITY, FL 32405

Title: STD ( ) Delete  
Name: ENTWISTLE, ANGEL  
Address: 1726 FRANKFORD AVENUE  
City-St-Zip: PANAMA CITY, FL 32405

## 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:

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: WOODROW NEWMANS

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date