## **2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

## DOCUMENT # N12147

1. Entity Name

## SOLITH BRIDGE PARK CONDOMINIUM ASSOCIATION



**FILED** Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90323 001 \*\*\*245.00

	2	IN AUGUCIATIC	, ,					
Principal Place	e of Business	Mailing Address		•				
1525 S TAMIAMI TRAIL #603 VENICE FL 34292 US		1525 S TAMIAMI TRAIL #603 VENICE FL 34292 US						
2. Principal Pl	lace of Business	3. Mailing Addres	\$		- ''	15,9 (186) (16) G(6) (18) B(6) B(6)		481 81 1881
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E037 (10/04)				
City & State		City & State			4. FEI Number Applied For Not Applicable			
Zip	Country	Zip	Cou	untry	5. Certificate of Sta		\$8.75 Add Fee Required	itional d
	6. Name and Address of Current	Registered Agent			7. Name and Addr	ess of New Registered A	Agent	
005	NULL DOUGE II			Name				
152	5 S TAMIAMI TRAIL			Street Address	(P.O. Box Number is N	ot Acceptable)	<u> </u>	
			City		FL Zip Code			
8. The above	named entity submits this statement for	r the purpose of chan	ging its register	ed office or registe	red agent, or both, in t		'   familiar with,	and accept
								,
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable	(NOTE Registere	enuper enutangis InegA br	d when reinstating)	DATE		<del></del>
							v	
CODVILLE, BRUCE H. 1525 S TAMIAMI TRAIL #603 VENICE FL 34292  8. The above named entity submits this statement for the obligations of registered agent.			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
10.	OFFICERS AND DI	 RECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND DIF	RECTORS IN	10
TITLE	PD	☐ Dele	ete TITL				Change	Addition
			NAM	.c				
NAME	CODVILLE, BRUCE H.			1				
STREET ADDRESS	1525 S TAMIAMI TRAIL STE 603		STRI	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	· ·	□ reiz	STRI	EET ADDRESS '-ST-ZIP			Change	☐ Addition
STREET ADDRESS	1525 S TAMIAMI TRAIL STE 603 VENICE FL	☐ Dele	STRI	EET ADDRESS (-ST-ZIP			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201	☐ Dele	STRI CITY DIE TITL NAM STRI	EET ADDRESS  '-ST-ZIP  E  ME  EET ADDRESS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL		STRI CITY DIE TITL NAM STRI CITY	EET ADDRESS  '-ST-ZIP  E  EET ADDRESS  '-ST-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL	☐ Dele	STRI CITY NAM STRI CITY TITL NAM STRI CITY	EET ADDRESS  '-ST-ZIP  E  EET ADDRESS  '-ST-ZIP  E			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL		STRI CITY NAM STRI CITY TITL NAM NAM NAM NAM NAM	EET ADDRESS  '-ST-ZIP  E  EET ADDRESS  '-ST-ZIP  E				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F.		STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI	EET ADDRESS  '-ST-ZIP  E  EET ADDRESS  '-ST-ZIP  E				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303		STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI CITY	EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME THE NAME THE NAME	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI CITY NAM	EET ADDRESS  '-ST-ZIP  E EET ADDRESS  (-ST-ZIP  E EET ADDRESS  (-ST-ZIP  E EET ADDRESS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI CITY NAM STRI NAM STRI NAM STRI NAM STRI	EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY	EET ADDRESS  (-ST-ZIP)  E  6E  6EET ADDRESS  (-ST-ZIP)  E  6E  6EET ADDRESS  (-ST-ZIP)  E  6E  6E  6E  6E  6E  6E  6E  6E  6E			☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY	EET ADDRESS ST-ZIP  E  6E  EET ADDRESS ST-ZIP  E  6E  EET ADDRESS ST-ZIP  E  6E  6E  6E  6E  6E  6E  6E  6E  6E			☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY	EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  AE  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E			☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1525 S TAMIAMI TRAIL STE 603 VENICE FL SD MCEACHERN, DONALD 1511 S. TAMIAMI TR. #201 VENICE FL TD DOWD, JOHN F. 1521 S TAMIAMI TRAIL #303	☐ Dele	STRI CITY NAM STRI CITY	EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  AE  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E			☐ Change ☐ Change ☐ Change	Addition Addition

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_

AME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #