## **2008 NOT-FOR-PROFIT CORPORATION**

## ANNUAL REPORT DOCUMENT # N16600 1. Entity Name SOUTHERN PALMS CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 31, 2008 8:00 am **Secretary of State** 

01-31-2008 90017 037 \*\*\*\*70.00

1521 SW 47TH TERR 15 203 20		203	1521 SW 47TH TERR						
CAFE CONAL	., PL 33914	CAPE CURAL, FL 33	914 05						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						EN ELEN BIEN	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01192008 <sub>CI</sub>	hg-NP	CR2E037 (	(12/06)	
City & State		City & State		4. FEI Number 65-015662	20			plied For at Applicable	
Zip	Country	Zip	Country		5. Certificate of St	tatus Desired		3.75 Add	litional
	6. Name and Address of Current	Registered Agent			7. Name and Add	Iress of New Re			
I RUSHMAN	N, RICHARD		Name						
1521 SW 47TH TERR CAPE CORAL, FL 33914			Street Address		P.O. Box Number is I	Not Acceptable)			
			City				FL	Zip Code	
8. The above	named entity submits this statement for tions of registered agent.	the purpose of changing	its registered office	or register	red agent, or both, in	the State of Flori	ida. I am fam	niliar with,	and accept
i i i i i i i i i i i i i i i i i i i	none of regional ob agains								
SIGNATURE	Signature, typed or printed name of registered agent :	and title of applicable (A)	OTE: Registered Agent sign	International disease	dunna cainalatan		DATE		
	organist agent	and may approace. (A	OTC, Hogistered Agent sign		A Marie II (Amis/Still(S)	<del> </del>	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008		Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees  Make check payable to Florida Department of State				
	Due by may 1, 2000	1100(101)	d Contribution.			Florid	da Departmo	ent of St	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

1-26-08