

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26616

FILED
Jul 06, 2009
Secretary of State

Entity Name: SOUTHWOOD, BLOCK 5 HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PMB 241
2357-3 S. TAMIAMI TRAIL
VENICE, FL 342935022

New Principal Place of Business:

Current Mailing Address:

PMB 241
2357-3 S. TAMIAMI TRAIL
VENICE, FL 342935022

New Mailing Address:

FEI Number: 65-0051450 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOUSTON, JUDITH
4995 PEPPERWOOD PLACE
VENICE, FL 34293 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOUSTON, JUDITH
Address: 4995 PEPPERWOOD PLACE
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: ADAMS, JIM
Address: 4261 TIMBERLINE BLVD
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: BONATZ, AL
Address: 4242 SPICETREE STREET
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: HOUSTON, SAM
Address: 4995 PEPPERWOOD PL
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: JOHNSON, MOLLIE
Address: 4916 TAMARACK TR
City-St-Zip: VENICE, FL 34293

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:

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: JUDITH E. HOUSTON

PRES

07/06/2009

Electronic Signature of Signing Officer or Director

Date