

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27858

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** SOUTHWOOD, BLOCK 4 HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4182 SUMMERTREE ROAD  
VENICE, FL 34293

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ATRIUM CAM  
514 N. INDIANA AVE.  
ENGLEWOOD, FL 34223

**New Mailing Address:**

**FEI Number:** 65-0139288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ATRIUM CAM  
514 N. INDIANA AVE  
ENGLEWOOD, FL 34223 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: D  
Name: THOMAS, BILL  
Address: 4182 SUMMERTREE ROAD  
City-St-Zip: VENICE, FL 34293

Title: T  
Name: LYDAY, CHRIS  
Address: 3708 COLONIAL CT.  
City-St-Zip: INDEPENDENCE, MO 64055

Title: D  
Name: SCHNEIDER, GLENDA  
Address: 4842 LIMETREE LAND  
City-St-Zip: VENICE, FL 34293

Title: P  
Name: LUKAS, TOM  
Address: 4895 TAMARACK TRAIL  
City-St-Zip: VENICE, FL 34293

Title: D  
Name: HOFFER, TONI MARIE  
Address: 4156 SUMMERTREE RD.  
City-St-Zip: VENICE, FL 34293

Title: VP  
Name: KIRK, ROBERT  
Address: 4862 LIMETREE LANE  
City-St-Zip: VENICE, FL 34293

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: THOMS LUKAS

P

03/02/2011

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

\_\_\_\_\_  
Date