

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31715

FILED
Mar 24, 2009
Secretary of State

Entity Name: SOUTHWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

969 S. FEDERAL HWY
SUITE 401
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

969 S. FEDERAL HWY
SUITE 401
STUART, FL 34994

New Mailing Address:

FEI Number: 59-1777670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBAUN, LENARD
969 S. FEDERAL HWY
SUITE 401
STUART, FL 34994 US

Name and Address of New Registered Agent:

GOLDBAUM, LENARD
969 S. FEDERAL HWY
SUITE 401
STUART, FL 34994 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: LENARD GOLDBAUM

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SANDLIN, CLIFF
Address: 522 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997

Title: SD () Delete
Name: HAWKEN, SARA
Address: 366 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997

Title: PD () Delete
Name: MCCREA, TRACY
Address: 544 SE MEADOW WOOD WAY
City-St-Zip: STUART, FL 34997

Title: VPD () Delete
Name: SIMONE, VITO
Address: 354 SE SOUTHWOOD TR.
City-St-Zip: STUART, FL 34997

Title: TD () Delete
Name: GODWIN, BOB
Address: 581 SE SOUTHWOOD TRAIL
City-St-Zip: STUART, FL 34997

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: LENARD GOLDBAUM

AGNT

03/24/2009

Electronic Signature of Signing Officer or Director

Date