

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33230

FILED
Apr 22, 2009
Secretary of State

Entity Name: SOUTHWOOD, BLOCK 3 HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

181 CENTER RD
VENICE, FL 34285 US

New Principal Place of Business:

181 CENTER ROAD
VENICE, FL 34285 US

Current Mailing Address:

181 CENTER RD
VENICE, FL 34285 US

New Mailing Address:

181 CENTER ROAD
VENICE, FL 34285 US

FEI Number: 65-0154227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER RD
VENICE, FL 34285 US

Name and Address of New Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 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: SHAUN O'GRADY

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPBELL, RON
Address: 4873 ORANGE TREE PL
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: MILLER, FREDA
Address: 4868 ORANGE TRE PLACE
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: SWANK, BEN
Address: 4846 TAMARACK TRL
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: ZIEFEL, HERBERT
Address: 4893 ORANGE TREE PL
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPBELL, RON
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: TD (X) Change () Addition
Name: MILLER, FREDA
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: SD (X) Change () Addition
Name: SWANK, BEN
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: D (X) Change () Addition
Name: ZIEFEL, HERBERT
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

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: SHAUN O'GRADY

CAM

04/22/2009

Electronic Signature of Signing Officer or Director

Date