

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# N41889

Entity Name: SOUTH DIXIE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5301 S. DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405

**New Principal Place of Business:**

**Current Mailing Address:**

5311 S. DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405

**New Mailing Address:**

FEI Number: 02-0548534      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HATFIELD, JERRY L DST  
5311 S. DIXIE HWY.  
WEST PALM BEACH, FL 33405      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: DP      ( ) Delete  
Name: AKDENIZ, YUJEL  
Address: 5301 S. DIXIE HWY.  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DV      ( ) Delete  
Name: HATFIELD, GARY  
Address: 5311 S DIXIE HWY  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DST      ( ) Delete  
Name: HATFIELD, JERRY  
Address: 5311 S. DIXIE HWY.  
City-St-Zip: WEST PALM BEACH, FL 33405

**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:

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: JERRY HATFIELD

DST

04/28/2009

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

\_\_\_\_\_  
Date