2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# N44812

Entity Name: SOUTHERN OAK ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5316 STATELY OAKS STREET
FORT PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 13483
FORT PIERCE, FL 34979

New Mailing Address:

5316 STATELY OAKS STREET
FORT PIERCE, FL 34981

FEI Number: 65-0359669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, DEBORAH L ESQ
759 SOUTH FEDERAL HWY, SUITE 212
STUART, FL 34994 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: PD ( ) Delete
Name: KINDRED, THOMAS JR.
Address: 5316 STATELY OAKS STREET
City-St-Zip: FORT PIERCE, FL 34981

Title: TD ( ) Delete
Name: BALITON, RON
Address: 5401 STATELY OAKS STREET
City-St-Zip: FT. PIERCE, FL 34981

Title: SD ( ) Delete
Name: STANTON, RENE
Address: 5412 STATELY OAKS STREET
City-St-Zip: FT. PIERCE, FL 34981

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: TOM KINDRED JR. PD 01/21/2009

Electronic Signature of Signing Officer or Director — Date