


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90205 050 ****61.25

DOCUMENT # N94000000291	
1. Entity Name SOUTHBRIDGE LANDING PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business PEGASUS PROPERTY MANAGEMENT, INC. 17595 SOUTH TAMiami TRAIL STE 100 FORT MYERS, FL 33908 US	Mailing Address PEGASUS PROPERTY MANAGEMENT, INC. 17595 SOUTH TAMiami TRAIL STE 100 FORT MYERS, FL 33908 US
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40081875



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04092007 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0493398	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MARSDEN, GARY PEGASUS PROPERTY MGMT 17959 SOUTH TAMiami TRAIL STE 100 FORT MYERS, FL 33908		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TUNELL, JACK			NAME			
STREET ADDRESS	3401 TRALEE CT #101			STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NARDOZZA, JOHN			NAME			
STREET ADDRESS	3431 BALLYBRIDGE #101			STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANDERSON, SAM			NAME			
STREET ADDRESS	3441 BALLYBRIDGE #102			STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP			
TITLE	SD	<input checked="" type="checkbox"/> Delete		TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MORAN, GERALDINE			NAME	FREEDMAN, BOB		
STREET ADDRESS	25071 BALLYCASTLE #201			STREET ADDRESS	25080 BALLYCASTLE #101		
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP	BONITA SPRINGS, FL 34134		
TITLE	VD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	O'KEEFE, MARILYN			NAME			
STREET ADDRESS	25050 BALLYCASTLE COURT #202			STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP			
TITLE	TD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JUDGE, BOB			NAME			
STREET ADDRESS	3470 BALLYBRIDGE #201			STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **ROBERT J. JUDGE TREAS.** **4/19/07** **239-293-5721**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #