## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003125

FILED Mar 28, 2009 Secretary of State

Entity Name: SOUTHBRIDGE CONDOMINIUM NO. 1 ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** PEGASUS PROPERTY MANAGEMENT, INC. SUITE 100 FORT MYERS, FL 33908 **New Mailing Address: Current Mailing Address:** PEGASUS PROPERTY MANAGEMENT, INC. SUITE 100 FORT MYERS, FL 33908 FEI Number: 65-0935073 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARSDEN, GARY ALLEN, STEVEN PEGASUS PROPERTY MANAGEMENT, INC. PEGASUS PROPERTY MANAGEMENT, INC. SUITE 100 SUITE 100 FORT MYERS, FL 33908 US FORT MYERS, FL 33908 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: SALLEN 03/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WILLIAM, PAUL Name: Name: 25060 BALLYCASTLE #203 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: PD () Delete Title: () Change () Addition FREEDMAN, BOB Name: Name: Address: 25080 BALLYCASTLE #101 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: VPD () Delete Title: (X) Change ( ) Addition MORSE, MERTON MORSE, MERTON Name: Name: 25090 BALLYCASTLE COURT #101 25090 BALLYCASTLE COURT #101 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 ( ) Delete (X) Change ( ) Addition Title: TD Title: SHOEMAKER, JASON SHOEMAKER, JASON Name: Name: 25060 BALLY CASTLE COURT #103 Address: 25060 BALLY CASTLE COURT #103 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: () Change () Addition BULSON, RONALD Name: Name: 25070 202 BALLYCASTLE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 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: S ALLEN A 03/28/2009