

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004142

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** SOUTHBRIDGE CONDOMINIUM NO. 4 ASSOCIATION, INC.

**Current Principal Place of Business:**

PEGASUE PROPERTY MGMT  
17595 S. TAMIOMI TRAIL #100  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

PEGASUE PROPERTY MGMT  
17595 S. TAMIOMI TRAIL #100  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 65-0851516

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSDEN, GARY  
17595 S. TAMIAMI TRAIL SUITE 100  
FORT MYERS, FL 33908 US

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

ALLEN, STEVEN  
17595 S. TAMIAMI TRAIL SUITE 100  
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: STEVEN ALLEN

03/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: KECK, BARBARA  
Address: 3490 BALLYBRIDGE CIR #202  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD ( ) Delete  
Name: SLAW, STEVE  
Address: 3510 BALLYBRIDGE CIR #103  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PD ( ) Delete  
Name: O'KEEFE, MARILYN J  
Address: 25050 BALLYBRIDGE CIRL, #202  
City-St-Zip: BONITA SPRINGS, FL 34134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: FITZGERALD, VINCENT  
Address: 25050 BALLYBRIDGE CT #203  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PD (X) Change ( ) Addition  
Name: O'KEEFE, MARILYN J  
Address: 25050 BALLYBRIDGE CIRL, #201  
City-St-Zip: BONITA SPRINGS, FL 34134

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: STEVE ALLEN

A

03/09/2009

Electronic Signature of Signing Officer or Director

Date