2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9500000635

FILED Jan 28, 2011 Secretary of State

Entity Name: SOVEREIGN ISLE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

4588 WOODWIND DR DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

C/O SOUTHERN ASSOCIATION MANAGEMENT
34894 EMERALD COAST PKWY

C/O SOUTHERN ASSOCIATION MANAGEMENT
4608 OPA LOCKA LANE SUITE 300

DESTIN, FL 32541 DESTIN, FL 32541

FEI Number: 59-3389447 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:

SOUTHERN ASSOCIATION MANAGEMENT
34894 EMERALD COAST PKWY
4608 OPA LOCKA LANE
SUITE 200

DESTIN, FL 32541 US SUITE 300
DESTIN, FL 32541 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: KATHLEEN CRESSE 01/28/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: ADKINS, JAY

Address: 4571 WOODWIND DR City-St-Zip: DESTIN, FL 32541

Title: S

Name: KRAUSE, RICHARD Address: 4598 WOODWIND DR City-St-Zip: DESTIN, FL 32541

Title: T

 Name:
 GUNDERSON, TREVOR

 Address:
 4555 WOODWIND DR

 City-St-Zip:
 DESTIN, FL 32541

Title: VF

Name: FELIZ, NESTOR
Address: 4566 WOODWIND DR
City-St-Zip: DESTIN, FL 32541

Title:

Name: COLLINS, LARRY
Address: 1604 WILLOW BEND
City-St-Zip: TYLER, TX 75703

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN CRESSE CAM 01/28/2011