2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2012
Secretary of State

DOCUMENT# N95000000635

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

Current Principal Place of Business:

4588 WOODWIND DR
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

C/O SOUTHERN ASSOCIATION MANAGEMENT
4608 OPA LOCKA LANE SUITE 300
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3389447 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOUTHERN ASSOCIATION MANAGEMENT
4608 OPA LOCKA LANE
SUITE 300
DESTIN, FL 32541 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: P
Name: GUNDERSON, TREVOR
Address: 4555 WOODWIND DR
City-St-Zip: DESTIN, FL 32541 US

Title: V
Name: ROSS, DEBORAH
Address: 4554 WOODWIND DR
City-St-Zip: DESTIN, FL 32541 US

Title: S
Name: WALKER, SUE
Address: 4590 WOODWIND DR
City-St-Zip: DESTIN, FL 32541 US

Title: T
Name: VALAITIS, ED
Address: 4586 WOODWIND DR
City-St-Zip: DESTIN, FL 32541 US

Title: D
Name: HEISER, SHERISSA
Address: 519 CHIANTI CT
City-St-Zip: LINCOLN, CA 95648 US

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 03/13/2012

Electronic Signature of Signing Officer or Director — Date