2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# N97000000574

Entity Name: S&S DEVELOPMENT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

400 HIGH POINT DR, SUITE 500
COCOA, FL 32926

New Principal Place of Business:

150 SHERIFF DRIVE
MELBOURNE, FL 32940

Current Mailing Address:

400 HIGH POINT DR, SUITE 500
COCOA, FL 32926

New Mailing Address:

P.O. BOX 459
PALATKA, FL 32178

FEI Number: 59-3488873 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

S &S ENTERPRISES, INC ATT: TAVANI
400 HIGH POINT DR, STE. 500
COCOA, FL 32926 US

Name and Address of New Registered Agent:

MCNAB, JR, JAMES M PRES
5185 S TROPICAL TRAIL
MERRITT ISLAND, FL 32952 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: JAMES M MCNAB, JR 06/23/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P/S ( ) Delete
Name: MCNAB, JAMES
Address: 5185 S TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP ( ) Delete
Name: CHHABRA, KRISHAN
Address: 4150 W KING ST
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: RONAK, JASANI
Address: 7500 FUTURES DR
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete
Name: STERLING, CHRISTA ESQ
Address: PO BOX 1669
City-St-Zip: CLEARWATER, FL 33757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: JAMES M MCNAB JR P 06/23/2009
Electronic Signature of Signing Officer or Director Date