

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005860

FILED
Mar 09, 2011
Secretary of State

Entity Name: SOUTHWOOD OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4475 US 1 SOUTH, STE. 601
ST. AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

5455 US 1 SOUTH
SUITE 3
SAINT AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3478141 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES
5455 A1A SOUTH
SUITE 3
SAINT AUGUSTINE, FL 32080 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: VPD
Name: KENNETT, DOUG
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: SD
Name: SAINDON, HERB
Address: 5455 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: PD
Name: GERWIG, CHARLES
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: D
Name: AMMERALL, JOHN
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: TD
Name: AIKEN, JEFFREY
Address: 5455 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080 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: JEFFREY AIKEN

TD

03/09/2011

Electronic Signature of Signing Officer or Director

Date