

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000078

FILED
Apr 08, 2009
Secretary of State

Entity Name: SOUTH PABLO BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

200 EXECUTIVE WAY
SUITE 206
PONTE VEDRA BCH, FL 32082

New Principal Place of Business:

2201 SAWGRASS VILLAGE DRIVE
PONTE VEDRA BCH, FL 32082

Current Mailing Address:

PO BOX 330168
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 59-3487226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELDER, MARTHA C MRS
200 EXECUTIVE WAY
SUITE 206
PONTE VEDRA BCH, FL 32082 US

Name and Address of New Registered Agent:

ELDER, MARTHA C MRS
2201 SAWGRASS VILLAGE DR
PONTE VEDRA BCH, FL 32082 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:

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: SPAULDING, GRETTA
Address: 388 SOUTH 1ST ST
City-St-Zip: JACKSONVILLE, FL 32250

Title: SD () Delete
Name: HAWKINS, LINDA
Address: 588 SEABROOK COVE RD
City-St-Zip: JACKSONVILLE, FL 32211

Title: PD () Delete
Name: SOLIS, GREG
Address: 382 SOUTH 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32250

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:

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: GREG SOLIS

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date