

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004863

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** SUWANNEE BROOK OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5060 89TH PLACE  
LIVE OAK, FL 32060 US

**New Principal Place of Business:**

**Current Mailing Address:**

5001 89TH PASS  
LIVE OAK, FL 32060 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PROULX, CHERYL A  
5001 89TH PASS  
LIVE OAK, FL 32060 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: PD  
Name: WILES, WAYNE T  
Address: 7851 SUPPLY DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: ST  
Name: MARTIN, JILL  
Address: 5098 89TH PASS  
City-St-Zip: LIVE OAK, FL 32060 US

Title: T  
Name: MARKHAM, DAVID  
Address: 11943 ARMSDALE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP  
Name: PROULX, CHERYL A  
Address: 5001 89TH PASS  
City-St-Zip: LIVE OAK, FL 32060 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: CHERYL A PROULX

VP

01/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date