

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002169

FILED
Apr 03, 2008
Secretary of State

Entity Name: SOUTHERN SHORES PROFESSIONAL CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5365 E. CTY HWY 30-A, STE. 105
SEAGROVE BEACH, FL 32459 US

New Principal Place of Business:

5365 E. CTY HWY 30-A
SEAGROVE BEACH, FL 32459 US

Current Mailing Address:

P.O. BOX 4762
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-3580619 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRUNI, ALAN P
5365 EAST 6TH HWY 30A
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

DOLPHIN DEVELOPERS, LLC
5008 HWY 98 WEST
SUITE 2B
SANTA ROSA BEACH, FL 32459 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: AL BRUNI

04/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WATSON, FRANKLIN H
Address: 5365 E. COUNTY HIGHWAY 30A, STE. 105
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: VPD () Delete
Name: BEAUCHAMP, KRYSTAL
Address: 5365 E. COUNTY HIGHWAY 30A, STE. 107
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: STD () Delete
Name: CHANCEY, WALT
Address: 5365 E. CTY HWY 30-A, STE. 108
City-St-Zip: SEAGROVE BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WATSON, FRANKLIN H
Address: 5365 E. COUNTY HIGHWAY 30A, STE. 105
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: VP (X) Change () Addition
Name: BEAUCHAMP, KRYSTAL
Address: 5365 E. COUNTY HIGHWAY 30A, STE. 107
City-St-Zip: SEAGROVE BEACH, FL 32459

Title: D (X) Change () Addition
Name: PREBLE, GREG
Address: 2822 REMINGTON GREEN CIRCLE, STE. 201
City-St-Zip: TALLAHASSEE, FL 32308

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: AL BRUNI

MGR

04/03/2008

Electronic Signature of Signing Officer or Director

Date