## 2008 NOT-FOR-PROFIT CORPORATION

## **FILED** Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90079 043 \*\*\*\*61.25

## ANNUAL REPORT

SIGNATURE:

DOCUMENT # N99000004463 WORTHINGTON CONDOMINIUM ASSOCIATION, INC. 40088408 Principal Place of Business Mailing Address STERLING MANAGEMENT STERLING MANAGEMENT 1701-B RICKENBACKER DR 1701-B RICKENBACKER DR SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573 2. Principal Place of Business - No PO Boy # 1 Mailing Address Sterling Management ot. #. etc. 01182008 Chq-NP CR2E037 (12/06) 1904 Clubhouse Drive Sun City Center, FL 33573 4. FEI Numbe Applied For ate 59-3592998 Not Applicable ī Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAW OFFICES OF JAMES DE FURIO Street Address (P.O. Box Number is Not Acceptable) 201 E KENNEDY BLVD STE 1460 TAMPA, FL 33602 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD ☐ Addition THILE Delete TITLE BRILEY, LUCEDA NAME NAME 2206 WORTHINGTON GREENS DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER, FL 33573 CITY-ST-ZIP ☐ Change TITLE TITLE ☐ Addition Delete NAME STANLEY, MARGARET F NAME STREET ADDRESS 2230 WORTHINGTON GREENS DR STREET ADDRESS SUN CITY CENTER, FL 335738045 CITY-S1-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE ☐ Addition SHEA, RUTH V NAME NAME 2212 WORTHINGTON GREENS DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER, FL 33573 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE BROMBERGER, RICHARD NAME NAME STREET ADDRESS 2223 WORTHINGTON GREEN STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER, FL 33573 CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME DELANEY, JUDITH NAME 2253 WORTHINGTON GREENS DR STREET ADDRESS STREET ADDRESS SUN CITY CENTER, FL 33573 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ER OR DIRECTOR

3-2-08

Daytime Phone #