

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000007095

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** SONOAH PROPERTIES INC

**Current Principal Place of Business:**

15210 AMBERLY DRIVE  
#1115  
TAMPA, FL 33647 US

**New Principal Place of Business:**

**Current Mailing Address:**

15210 AMBERLY DRIVE  
#1115  
TAMPA, FL 33647 US

**New Mailing Address:**

**FEI Number:** 27-4608144      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PARSONS, REBA-LYNNE  
15210 AMBERLY DRIVE  
#1115  
TAMPA, FL 33647 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:** VP  
**Name:** PARSONS, SONDR  
**Address:** 4032 DEIHL ROAD  
**City-St-Zip:** CINCINNATI, OH 45236 US

**Title:** VP  
**Name:** PARSONS, CADE  
**Address:** 5452 EHRLING ROAD  
**City-St-Zip:** CINCINNATI, OH 45227 US

**Title:** P  
**Name:** PARSONS, REBA-LYNNE  
**Address:** 15210 AMBERLY DRIVE, #1115  
**City-St-Zip:** TAMPA, FL 33647 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** REBA-LYNNE PARSONS

P

03/16/2012

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

\_\_\_\_\_  
Date