

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000052092

Entity Name: SSA PROPERTIES, INC.

FILED  
Apr 24, 2005  
Secretary of State

## Current Principal Place of Business:

2032-A SOUTHSIDE BOULEVARD  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

2032-4 SOUTHSIDE BOULEVARD  
JACKSONVILLE, FL 32216

## Current Mailing Address:

8187 SABAL OAK LN  
JACKSONVILLE, FL 32256

## New Mailing Address:

FEI Number: 59-3517137      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORD, JETER, BOWLUS, DUSS, MORGAN, KENNEY & SAFER  
3652 CROWN POINT COURT  
JACKSONVILLE, FL 32257      US

## Name and Address of New Registered Agent:

CHERYL, SUMMERS L PRES  
8187 SABAL OAK LN.  
JACKSONVILLE, FL 32256      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: CHERYL L. SUMMERS

04/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: ALBERT, JERRY G  
Address: 1415 BIG TREE ROAD  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D      ( ) Delete  
Name: SUMMERS, CHERYL L  
Address: 8187 SABAL OAK LANE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D      ( ) Delete  
Name: SURY, ROBERT  
Address: 4977 RIVERPOINT RD  
City-St-Zip: JACKSONVILLE, FL 32207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P      (X) Change ( ) Addition  
Name: SUMMERS, CHERYL L  
Address: 8187 SABAL OAK LANE  
City-St-Zip: JACKSONVILLE, FL 32256

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERYL L SUMMERS

PRES

04/24/2005

Electronic Signature of Signing Officer or Director

Date