

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000094703

Entity Name: SONO PARTNERS, INC.**Current Principal Place of Business:**146 CHESTNUT RIDGE RD
MILLS RIVER, NC 28759**Current Mailing Address:**146 CHESTNUT RIDGE RD
MILLS RIVER, NC 28759**FEI Number:** 65-0716658**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VECCIA, BRIAN
1800 LAKE DRIVE
DELRAY BEACH, FL 33444 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VP
Name	CHARLES E. PASSMORE
Address	146 CHESTNUT RIDGE RD
City-State-Zip:	MILLS RIVER NC 28759

Title	D
Name	VECCIA, JOSEPH
Address	1800 LAKE DRIVE
City-State-Zip:	DELRAY BEACH FL 33444

Title	D
Name	CRYAN, GREGORY
Address	680 GLENOVER DRIVE
City-State-Zip:	ALPHARETTA GA 30004

Title	VP
Name	FITZ-HENRY, DON
Address	1800 LAKE DRIVE
City-State-Zip:	DELRAY BEACH FL 33444

Title	VP
Name	VECCIA, BRIAN
Address	1800 LAKE DRIVE
City-State-Zip:	DELRAY BEACH FL 33444

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: C. E.PASSMORE

VP

03/27/2014

Electronic Signature of Signing Officer/Director Detail_____
Date