2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725016

FILED Jan 06, 2009 Secretary of State

Entity Name: CONQUISTADOR CONDOMINIUM X ASSOC. INC.

Current Principal Place of Business: New Principal Place of Business:

1800 S.E. ST. LUCIE BLVD. 1800 S.E. ST. LUCIE BLVD. STUART, FL 34996

CLUBHOUSE STUART, FL 34996

Current Mailing Address: New Mailing Address:

1800 S.E. ST. LUCIE BLVD. STUART, FL 34996 1800 S.E. ST. LUCIE BLVD.

CLUBHOUSE STUART, FL 34996

FEI Number: 59-1545836 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FREDDERICK, LESLEY FREDERICK, LESLEY 1800 SE ST LÚCIE BLVD 1800 SE ST LUCIE BLVD STUART, FL 34996 STUART, FL 34996

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: LESLEY A FREDERICK 01/06/2009

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

STUART, FL 34996

1VPD 1VPD () Delete (X) Change () Addition KANE. AUDREY KANE, AUDREY Name: Name:

1800 SE ST. LUCIE BLVD 10-102 Address: 1800 SE ST. LUCIE BLVD Address: City-St-Zip: STUART, FL 34996

(X) Change () Addition Title: 2VPD () Delete Title: 2VPD

VOORHES, AVIS Name: PLANT, ROBERT Name: Address: 1800 SE ST. LUCIE BLVD 10-308 Address: 1800 SE ST. LUCIE BLVD

City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996

Title: PD() Delete Title: PD (X) Change () Addition MURPHY, ANN MURPHY, ANNE Name: Name:

1800 SE ST LUCIE BLVD 1800 SE ST LUCIE BLVD Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996

Title: SD () Delete Title: SD (X) Change () Addition

Name: WILLIAMS, KAY Name: WILLIAMS, KAY 1800 SE ST. LUCIE BLVD 10-206 Address: Address: 1800 SE ST. LUCIE BLVD City-St-Zip: STUART, FL 34996 City-St-Zip: STUART, FL 34996

Title: () Delete Title: () Change () Addition

AMES, PRISCILLA Name: Name: 1800 SE ST. LUCIE BLVD 10-106 Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip:

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: ANNE MURPHY PD 01/06/2009