2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726470

FILED Mar 13, 2009 Secretary of State

Entity Name: BUCCANEER CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US **Current Mailing Address: New Mailing Address:** 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US FEI Number: 59-1595065 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: HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W. SR 434, STE. 5000 LONGWOOD, FL 327795044 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NELSON, RUSSELL Name: Name: 1175 HWY A1A #505 Address: Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: () Delete Title: () Change () Addition BRODEUR, ARTHUR Name: Name: Address: 1175 HWY A1A #308 Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: () Delete Title: () Change () Addition AMIGO, FRANK J Name: Name: 8320 SW 91 TER Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: STD () Delete Title: () Change () Addition WINTERICH, DONALD Name: Name: Address: 1175 HIGHWAY A1A #206 Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: () Delete Title: TD (X) Change () Addition RANSOME, RICHARD GREENE, JAMES Name: Name: 1175 HIGHWAY A1A #807 3270 GATLIN DR Address: Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: VIERA, FL 32955 Title: () Delete Title: (X) Change () Addition HARRISON, JIM GARRETT, ROBERT Name: Name: Address: 1175 HIGHWAY A1A #605 Address: 1175 HIGHWAY A1A #411 SATELLITE BEACH, FL 32937 SATELLITE BEACH, FL 32937 City-St-Zip: 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: RUSSELL NELSON PD 03/13/2009