

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006628

FILED
Apr 14, 2009
Secretary of State

Entity Name: EAGLE TREE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE RITZ-CARLTON DEV. CO INC.
6649 WESTWOOD BLVD - SUITE 500
ORLANDO, FL 328216090

New Principal Place of Business:

Current Mailing Address:

MVCI -RESORT SERVICES
6649 WESTWOOD BLVD - SUITE 110
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 02-0539819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: T () Delete
Name: ELEYSSAMI, YALELL
Address: 6649 WESTWOOD BLVD
City-St-Zip: ORLANDO, FL 32821

Title: T () Delete
Name: ROGER, DUNHAM
Address: 503 BALD EAGLE DR
City-St-Zip: JUPITER, FL 33477

Title: P () Delete
Name: LEANDRO, SANDY
Address: 6649 WESTWOOD BLVD
City-St-Zip: ORLANDO, FL 32821

Title: S () Delete
Name: KANAVOS, PAUL
Address: 650 MADISON AVENUE, 15TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D (X) Delete
Name: MOORE, CHERYL
Address: 71 OCEAN AVENUE
City-St-Zip: PALM BEACH SHORES, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: SACKS, ED
Address: 502 BALD EAGLE DR
City-St-Zip: JUPITER, FL 33477

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

Title: D (X) Change () Addition
Name: MOORE, CHERYL
Address: 71 OCEAN AVENUE
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: () Change () Addition
Name:
Address:
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: LANA J CULLUM

_____ Electronic Signature of Signing Officer or Director

SPS

04/14/2009

_____ Date