2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003472

Apr 23, 2008 Secretary of State

Entity Name: ABACO BAY CONDOMINIUM ASSOCIATION, INC.

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

C/O MOORE PROPERTY MANAGEMENT 745 12TH AVE SOUTH, STE AA NAPLES, FL 34102

New Mailing Address: Current Mailing Address:

C/O MOORE PROPERTY MANAGEMENT 745 12TH AVE SOUTH, STE AA NAPLES, FL 34102

FEI Number: 20-2667291 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:

MOORE PROPERTY MANAGEMENT, LLC 745 12TH AVE S SUITE AA NAPLES, FL 34102 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BURNEY, KEN ROMAS, CHRISTINA Name: Name:

4625 BAYSHORE DR D-7 Address: 20522 LARINO LOOP Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: ESTERO, LF 33928

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

CASSIDY, JOSH Name: Name: Address: 4629 BAYSHORE DR J-7 Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:

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

STAUBER, BETTY Name: Name: 4635 BAYSHORE DR P-6 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:

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

Name: ANDERSON, ALEX Name: ANDERSON, ALEX 4796 CRAYTON CT Address: Address: 4796 CRAYTON CT City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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

MESSMER, ROBERT MESSMER, ROBERT Name: Name: 2978 ORANGE ST 2978 ORANGE ST Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

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: ALEX ANDERSON Ρ 04/23/2008