2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000001493

TILED
Oct 19, 2009
Secretary of State

Entity Name: NAUTICA HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** QUALITY MANAGEMENT GROUP 9045 LA FONATANA BLVD., #101 BOCA RATON, FL 33434 **New Mailing Address: Current Mailing Address:** QUALITY MANAGEMENT GROUP 9045 LA FONATANA BLVD., #101 BOCA RATON, FL 33434 FEI Number: 65-0640300 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: SKRLD, INC 201 ALHAMBRA CIRCLE #1102 CORAL GABLES, FL 33134 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 (X) Change () Addition PANIZZI, FRANK CURTIN, BILL Name: Name: 9045 LA FONTANA BLVD., STE 101 Address: 9045 LA FONTANA BLVD., STE 101 Address: City-St-Zip: BOCA RATON, FL 33434 US City-St-Zip: BOCA RATON, FL 33434 US Title: () Delete Title: () Change () Addition DAVIS, ANDREW Name: Name: Address: 9045 LA FONTANA BLVD., STE 101 Address: City-St-Zip: BOCA RATON, FL 33434 US City-St-Zip: Title: () Delete Title: (X) Change () Addition SKARECKI, NICHOLAS Name: SKARECKI, NICHOLAS Name: 9045 LA FONTANA BLVD., STE 101 Address: Address: 9045 LA FONTANA BLVD., STE 101 City-St-Zip: BOCA RATON, FL 33434 US City-St-Zip: BOCA RATON, FL 33434 US Title: () Delete Title: (X) Change () Addition Name: CURTAIN, BILL Name: AGNEW, LYLE 9045 LA FONTANA BLVD., STE 101 9045 LA FONTANA BLVD., STE 101 Address: Address: City-St-Zip: BOCA RATON, FL 33434 US City-St-Zip: BOCA RATON, FL 33434 US Title: () Delete Title: () Change (X) Addition LAVOIE, ANNE Name: Name: 9045 LA FONTANA BLVD. STE 101 Address: Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33434 US

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: BILL CURTIN P 10/19/2009