2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756634

FILED Apr 20, 2009 Secretary of State

Entity Name: ENGLEWOOD BEACH PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: KEYS-CALDWELL, INC. 1162 INDIAN HILLS BLVD. VENICE, FL 34293 **Current Mailing Address: New Mailing Address:** KEYS-CALDWELL, INC 1162 INDIAN HILLŚ BLVD VENICE, FL 34293 FEI Number: 59-2233117 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: KRAUT, JAMES S KEYS CALDWELL INC 1162 INDIAN HILLS BLVD VENICE, FL 34293 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 NEEVES, ED NEEVES, ED Name: Name: 1480 GULA BLVD. #101 Address: 1480 GULA BLVD. #101 Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: Title: SD (X) Change () Addition () Delete WOMBAHCER, DODIE Name: TANIS, PETER Name: Address: 1480 GULF BLVD., #207 Address: 1480 GULF BLVD., #302 City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: () Delete Title: () Change () Addition MILLIGAN, LEE Name: Name: 1480 GULF BLVD Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: NELSON, WILMA W Name: Address: 13 LONE OAK CT. Address: City-St-Zip: BLOOMINGTON, IL 61704 City-St-Zip: Title: () Delete Title: PΠ (X) Change () Addition TANIS, PETER BRAGG, STEVE Name: Name: 1480 GULF BLVD #302 1480 GULF BLVD #205 Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: () Delete Title: () Change () Addition SNYDER, JACK Name: Name: Address: 1480 GULF BLVD, #306 Address: ENGLEWOOD, FL 34223 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: STEVE BRAGG PD 04/20/2009