

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713753

FILED
Apr 17, 2009
Secretary of State

Entity Name: PAGET HOUSE CONDOMINIUM CO., INC.

Current Principal Place of Business:

5520 N. OCEAN BLVD
OCEAN RIDGE, FL 33435

New Principal Place of Business:

Current Mailing Address:

% MANAGEMENT SERVICES
5011 N. OCEAN BLVD
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 59-1284802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AASKOV, GAIL ADAMS
% MANAGEMENT SERVICES
5011 N. OCEAN BLVD
OCEAN RIDGE, FL 33435 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: D () Delete
Name: KILBURN, DORY
Address: 5520 NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DS () Delete
Name: HEAD, REBECCA
Address: 5520 NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DVP () Delete
Name: ANDRAS, JOAN
Address: 5520 N. OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DVP () Delete
Name: BISLAND, DORIS
Address: 5520 N OCEAN BLVD # 209
City-St-Zip: OCEAN RIDGE, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KILBURN, DORY
Address: 5520 NORTH OCEAN BLVD #206
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DS (X) Change () Addition
Name: SIDLER, SHERRY
Address: 5520 NORTH OCEAN BLVD #208
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DT (X) Change () Addition
Name: KURDIRKA, CAROL
Address: 5520 N. OCEAN BLVD 211
City-St-Zip: OCEAN RIDGE, FL 33435

Title: DVP (X) Change () Addition
Name: BISLAND, DORIS
Address: 5520 N OCEAN BLVD # 203
City-St-Zip: OCEAN RIDGE, FL 33435

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: DORY KILBURN

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date