

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715606

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: ENGLEWOOD ISLES I ASSOCIATION, INC.

## Current Principal Place of Business:

18-A OAKWOOD DRIVE NORTH  
ENGLEWOOD, FL 34223

## New Principal Place of Business:

## Current Mailing Address:

504 N. INDIANA AVE  
ENGLEWOOD, FL 34223

## New Mailing Address:

514 N. INDIANA AVE  
ENGLEWOOD, FL 34223

FEI Number: 59-1507155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ATRIUM CAM, INC.  
504 N. INDIANA AVE.  
ENGLEWOOD, FL 34223 US

## Name and Address of New Registered Agent:

ATRIUM CAM, INC.  
514N. INDIANA AVE.  
ENGLEWOOD, FL 34223 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:

04/13/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CORCORAN, DIANNE  
Address: 5 OAKWOOD DR N  
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP ( ) Delete  
Name: MORGAN, TED  
Address: 1191 PORTERVILLE RD.  
City-St-Zip: EAST AURORA, NY 14052

Title: P ( ) Delete  
Name: PONIATOWSKI, RICHARD  
Address: 10 OAK DR. N.  
City-St-Zip: ENGLEWOOD, FL 34223

Title: S ( ) Delete  
Name: O;ROURKE, JAMES  
Address: 27 OAKWOOD DR N  
City-St-Zip: ENGLEWOOD, FL 34223

Title: T ( ) Delete  
Name: BOOTHE, MIKE  
Address: 42 OAKWOOD DR N  
City-St-Zip: ENGLEWOOD, FL 34223

Title: D ( ) Delete  
Name: SHIMKUS, MIKE  
Address: 40 OAKWOOD DR S  
City-St-Zip: ENGLEWOOD, FL 34223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: CORCORAN, DIANNE  
Address: 5 OAKWOOD DR N  
City-St-Zip: ENGLEWOOD, FL 34223

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

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

Title: D (X) Change ( ) Addition  
Name: O;ROURKE, JAMES  
Address: 27 OAKWOOD DR N  
City-St-Zip: ENGLEWOOD, FL 34223

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

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: RICHARD J. PONIATOWSKI

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date