2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716871

Apr 29, 2009 Secretary of State

Entity Name: BERKELEY MANOR - A CONDOMINIUM, INC.

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

5495 N.W. 10 CT. PLANTATION, FL 33313

Current Mailing Address: New Mailing Address:

5495 N.W. 10 CT. 8317 W ATLANTIC BLVD. PLANTATION, FL 33313 CORAL SPRINGS, FL 33071 US

FEI Number: 59-1306437 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:

ROYAL PROPERTY MANAGEMENT 8317 WEST ALTANTIC BOULEVARD CORAL SPRINGS, FL 33071

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FEDELE, RALPH FEDELE, RALPH Name: Name: 5495 NW 10TH CT 208 Address: 5495 NW 10TH CT # 208 Address: City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

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

TAYLOR, DELONEY Name: TAYLOR, DELONEY Name: Address: 5495 NW 10 CT 306 Address: 5495 NW 10 CT # 306 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

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

METAYER, MASRET MAHABEER, B Name: Name: 5495 NW 10TH CT #303 Address: Address: 5495 NW 10TH CT #106 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

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

Name: WILLIAMS, WAYNE Name: WILLIAMS, WAYNE Address: 5495 NW 10TH CT 108 Address: 5495 NW 10TH CT # 108 City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

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

HUDSON, SCOTT HUDSON, SCOTT Name: Name: 5495 NW 10 CT 204 5495 NW 10 CT # 204 Address: Address: PLANTATION, FL 33313 City-St-Zip: City-St-Zip: PLANTATION, FL 33313

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: RALPH FEDELE Ρ 04/29/2009