

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716898

FILED
Feb 02, 2009
Secretary of State

Entity Name: ESSEX HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

707 S GULFSTREAM AVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

707 S GULFSTREAM AVE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-1745545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFRANCO, JENNIFER
707 S. GULFSTREAM AVE #304
SARASOTA, FL 34236 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: VP () Delete
Name: SHARELL, GIL
Address: 707 S GULFSTREAM AVE, # 1008
City-St-Zip: SARASOTA, FL 34236

Title: P () Delete
Name: VARANO, LOTTIE
Address: 707 S GULFSTREAM AVE, # 1001
City-St-Zip: SARASOTA, FL 34236

Title: S () Delete
Name: ANDRACCHIO, VINCENT H
Address: 707 S GULFSTREAM AVE, # 305
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: PERNA, RALPH
Address: 707 GULFSTREAM AVE, # 202
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: KIRSCHNER, ROBERT
Address: 707 S. GULFSTREAM AVE #101
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: CHOKR, MICHAEL
Address: 707 S. GULFSTREAM AVE #802
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: PERRET, CHARLOTTE
Address: 707 S GULFSTREAM AVE, # 1101
City-St-Zip: SARASOTA, FL 34236

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

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: JENNIFER DEFRANCO

RA

02/02/2009

Electronic Signature of Signing Officer or Director

Date