2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# 723120

Entity Name: BOCA CIEGA POINT EAST ELEVEN CONDOMINIUM COPROATION, INC

Current Principal Place of Business:

ORPORATION, INC
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG, FL 33708

New Principal Place of Business:

275 BOCA CIEGA PT BLVD
ST. PETERSBURG, FL 33708

Current Mailing Address:

ORPORATION, INC
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG, FL 33708

New Mailing Address:

275 BOCA CIEGA PT BLVD
ST. PETERSBURG, FL 33708

FEI Number: 59-1561105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FEDERATION OF BOCA CIEGA PT CONDO, INC.
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG, FL 33708 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: TD ( ) Delete
Name: GARRETT, JUDY
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D ( ) Delete
Name: JACOBS, CARL
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: S ( ) Delete
Name: KENT, KAREN
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: ST PETERSBURG, FL 33708

Title: PD ( ) Delete
Name: GULLO, NORMA
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: ST PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: GARRETT, JUDY
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: SAINT PETERSBURG, FL 33708

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

Title: STD (X) Change ( ) Addition
Name: KENT, KAREN
Address: 275 BOCA CIEGA PT BLVD
City-St-Zip: ST PETERSBURG, FL 33708

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: NORMA GULLO PRES 03/18/2009

Electronic Signature of Signing Officer or Director — Date