2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

Aug 06, 2009 **DOCUMENT#724392** Secretary of State

Entity Name: PRIVATEER NORTH CONDOMINIUM ASSOCIATION, INC.

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

9031 TOWN CENTER PARKWAY BRADENTON, FL 34202

Current Mailing Address: New Mailing Address:

9031 TOWN CENTER PARKWAY BRADENTON, FL 34202

FEI Number: 59-1540826 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:

DOUGLAS & WILSON 9031 TOWN CENTER PKWY BRADENTON, FL 34202

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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

WASHINGTON, DC 20015

FILED

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD (X) Change () Addition () Delete

LANGENBACH, WERNER SKEMP, GEORGE Name: Name: 1050 LONGBOAT CLUB RD #403 Address: 1050 LONGBOAT CLUB RD #405 Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228

Title: SD () Delete Title: () Change () Addition

MILLER, ROSEMARY Name: Name: Address: 33291 OCEAN HILL DR Address: City-St-Zip: DANA POINT, CA 92629 City-St-Zip:

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

ERICKSON, DAVID Name: Name: Address: 1740 HILLSIDE DR #103 Address: City-St-Zip: ELLISON BAY, WI 54210 City-St-Zip:

BRADENTON, FL 34202

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

MOELLER, MARY LOU Name: FINCH, EMILE 5111 WIND POINT RD Address: Address: 13300 WEST 71ST STREET City-St-Zip: RACINE, WI 53402 City-St-Zip: SHAWNEE, KS 66216

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

KOVACIK, MAGDA PARRIS, THOMAS Name: Name:

455 LONGBOAT CLUB RD #306 1050 LONGBOAT CLUB RD, #402 Address: Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: LONGBOAT KEY, FL 34228

Title: () Delete Title: (X) Change () Addition WILSON, DOUGLAS E NEWMAN, STANLEY Name: Name: Address: 9031 TOWN CENTER PKWY Address: 5739 MORELAND STREET NW

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.

City-St-Zip:

SIGNATURE: ROSEMARY MILLER SD 08/06/2009