

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

02-25-2008 90071 025 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>DOCUMENT # 726270</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                      |                                                                                                                        |                                                                             |                                                        |                                                                                    |
| 1. Entity Name<br><b>EASTPOINTE CONDOMINIUM 1 ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
| Principal Place of Business<br><b>5380 NORTH OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                      |                                                                                                                        | Mailing Address<br><b>5380 NORTH OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b> |                                                                                                                                         |                                                                                    |
| 2. Principal Place of Business - No P.O. Box                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                      |                                                                                                                        | 3. Mailing Address                                                          |                                                                                                                                         |                                                                                    |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      |                                                                                                                        | Suite, Apt. #, etc.                                                         |                                                                                                                                         |                                                                                    |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                      |                                                                                                                        | City & State                                                                |                                                                                                                                         |                                                                                    |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Country                                                                              | Zip                                                                                                                    | Country                                                                     | 4. FEI Number<br><b>59-1559585</b>                                                                                                      |                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                      |                                                                                                                        |                                                                             | Applied For<br><input type="checkbox"/> Not Applicable                                                                                  |                                                                                    |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
| 6. Name and Address of Current Registered Agent<br><br><b>JOYCE O'NEILL<br/>EASTPOINT CONDO I. ASSOCIATION<br/>5380 NORTH OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                      |                                                                                                                        |                                                                             | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code |                                                                                    |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
| SIGNATURE <i>Joyce O'Neill, MGR</i> <i>John Kuray</i> <b>2/1/08</b><br><small>Signature of person to whom report is registered agent and who is accepting the obligations of registered agent. (NOTE: Any person who is not a resident of Florida cannot be a registered agent.)</small> DATE                                                                                                                                                                                                                                                                                                                                                 |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
| <b>FILE NOW! FEES \$61.25</b><br><b>Due By: May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                      | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                             | Make Check Payable to<br><b>Florida Department of State</b>                                                                             |                                                                                    |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      |                                                                                                                        | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                |                                                                                                                                         |                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>D<br/>ALEXANDER, ALBERT<br/>5380 NORTH OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b> | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>VP<br/>KURITZ, JOHN<br/>5380 N OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b>         | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>S<br/>MARTIN, STEPHAN<br/>5380 N OCEAN DR<br/>RIVIERA BEACH FL 33404</b>          | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       | <b>S<br/>Bordieri, Paul<br/>5380 North Ocean Drive<br/>Riviera Beach, FL 33404</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>D<br/>DRIER, HARRY<br/>5380 N OCEAN DR<br/>RIVIERA BEACH FL 33404</b>             | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>P<br/>NARDULLI, ETTORE<br/>5380 N OCEAN DR<br/>RIVIERA BEACH FL 33404</b>         | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |                                                                                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>T<br/>EWING, RICHARD<br/>5380 NORTH OCEAN DRIVE<br/>RIVIERA BEACH FL 33404</b>    | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                       |                                                                                    |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like information. |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |
| SIGNATURE: <i>John Kuray</i> <b>3/28/08</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Box 111 Phone #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                                                                                                                        |                                                                             |                                                                                                                                         |                                                                                    |

*President*

ATTACHMENT

66005946

#726270

EASTPOINTE CONDOMINIUM ASSOCIATION, INC.

Tower 1

5380 NORTH OCEAN DRIVE  
SINGER ISLAND, FLORIDA 33404  
(561) 842-6771

February 14, 2008

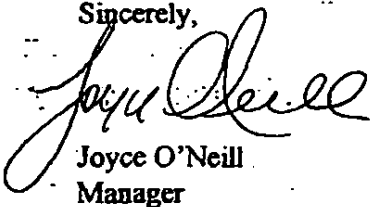
Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

RE: Document #726270

Following is a listing of the additional Director for Eastpointe Condominium I  
Association, Inc.:

D  
Glenn Donald  
5380 North Ocean Drive  
Riviera Beach, FL 33404

Sincerely,

  
Joyce O'Neill  
Manager

