

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730115

FILED
Mar 25, 2009
Secretary of State

Entity Name: CLOISTER OF ATLANTIC BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3015 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

2900 HARTLEY RD
JACKSONVILLE, FL 32257 US

Current Mailing Address:

3015 HARTLEY RD
JACKSONVILLE, FL 32257 US

New Mailing Address:

2900 HARTLEY RD
JACKSONVILLE, FL 32257 US

FEI Number: 59-1655955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STELLAR PROPERTIES
3015 HARTLEY RD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

HALL, GEORGE
4736 BLANDING BLVD
JACKSONVILLE, FL 32210 US

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: GEORGE HALL

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROWN, ALISON
Address: 10 TENTA STREET #64
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: V () Delete
Name: POWELL, DORTIE
Address: 10 TENTH STREET #19
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T () Delete
Name: BAKER, RICK
Address: 5932 CLIFTON RD
City-St-Zip: JACKSONVILLE, FL 32211

Title: SD () Delete
Name: STEVENS, MARGIE
Address: 6190 MERCER CIRCLE E
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROWN, ALISON
Address: 10 TENTH STREET #64
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: V (X) Change () Addition
Name: POWELL, DORTHY
Address: 10 TENTH STREET #19
City-St-Zip: ATLANTIC BEACH, FL 32233

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

Title: SD (X) Change () Addition
Name: STEVENS, MARGIE
Address: 10 TENTH ST #56
City-St-Zip: JACKSONVILLE, FL 32233

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: ALISON BROWN

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date