2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# 741839

Entity Name: THE CONSTELLATION CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9445 BLIND PASS ROAD
ST PETE BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

9445 BLIND PASS ROAD
ST PETE BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-1853544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, BRIAN K.
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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: SD ( ) Delete
Name: HUHN, LORRAINE
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

Title: VPD ( ) Delete
Name: CROOK, JAMES
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

Title: D ( ) Delete
Name: OWENS, MARY
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: PD ( ) Delete
Name: BELDIN E, MONA
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: TD ( ) Delete
Name: JAFFE, DONALD
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: JONES, SHARON
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

Title: VPTD (X) Change ( ) Addition
Name: CROOK, JAMES
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33702

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

Title: D (X) Change ( ) Addition
Name: BELDIN E, MONA
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: PD (X) Change ( ) Addition
Name: HUHN, LORRIANE
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

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: LORRAINE HUHN PD 04/28/2009

Electronic Signature of Signing Officer or Director — Date