2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# 745525

Entity Name: PRO'S NEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

625 SOUTHWIND CIRCLE., APT 102
N. PALM BEACH, FL 334085314

New Principal Place of Business:

1340 US HIGHWAY 1 STE 102
JUPITER, FL 33469

Current Mailing Address:

625 SOUTHWIND CIRCLE., APT 207
N. PALM BEACH, FL 334085314

New Mailing Address:

1340 US HIGHWAY 1 STE 102
JUPITER, FL 33469

FEI Number: 59-2066653 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHELLE TYREE
625 SOUTHWIND CIRCLE
APT 207
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

JUPITER MANAGEMENT LLC
1340 US HIGHWAY 1
STE 102
JUPITER, FL 33469 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: STEVEN SKAKANDY 02/17/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BERGSMA, SCOTT
Address: 625 SOUTHWIND #210
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: T ( ) Delete
Name: TYREE, MICHELLE
Address: 625 SOUTHWIND #207
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D ( ) Delete
Name: KNOX, CHARLES
Address: 625 SOUTHWIND CIRCLE., APT 102
City-St-Zip: N. PALM BEACH, FL 334085314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: STEVEN SKAKANDY RA 02/17/2009
Electronic Signature of Signing Officer or Director — Date