

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746436

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** EASTWOOD SHORES CONDOMINIUM NO. 1 ASSOCIATION, INC.

**Current Principal Place of Business:**

9185 S HWY 19 N  
PINELLAS PARK, FL 33782

**New Principal Place of Business:**

1799 NORTH BELCHER ROAD  
SUITE B  
CLEARWATER, FL 33765

**Current Mailing Address:**

9185 S HWY 19 N  
PINELLAS PARK, FL 33782

**New Mailing Address:**

P.O. BOX 14357  
CLEARWATER, FL 33766

**FEI Number:** 59-1893370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BREEDEN, LES  
MANLANDS PROPETIES, INC  
9185 US HWY 19 N  
PINELLAS PARK, FL 33782 US

**Name and Address of New Registered Agent:**

AMERI-TECH REALTY, INC.  
1799-B BELCHER ROAD  
SUITE B  
CLEARWATER, FL 33766 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: MICHAEL G PEREZ, PRESIDENT

01/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: PINZEL, EDWARD  
Address: 2944 #C LICHEN LANE  
City-St-Zip: CLEARWATER, FL 33760

Title: T ( ) Delete  
Name: WILLIAMS, PATRICIA M  
Address: 1836 BOUGH AVE B  
City-St-Zip: CLEARWATER, FL 33760

Title: S ( ) Delete  
Name: KRZEBIOT, JUDITH  
Address: 1848 BOUGH AVE APT B  
City-St-Zip: CLEARWATER, FL 33760

**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: PATRICIA M WILLIAMS

T

01/09/2009

Electronic Signature of Signing Officer or Director

Date