2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750064

FILED Apr 09, 2009 Secretary of State

Entity Name: SWALLOWS OF SAN MARCO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

960 SWALLOW AVE MARCO ISLAND, FL 34145

Current Mailing Address: New Mailing Address:

C/O RESORT & MGMT P.O. BOX 1845

834 BALD EAGLE DR MARCO ISLAND, FL 34146 MARCO ISLAND, FL 34145

FEI Number: 16-1316737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GRUESEL, JAMIE 1104 N. COLLIER BLVD MARCO ISLAND, FL 34145 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPTD () Delete Title: PD (X) Change () Addition Name: MARANDINO, DOMINIC Name: DAIGLER, GERALAD

Name: MARANDINO, DOMINIC Name: DAIGLER, GERALAD
Address: 1 APPLELAND Address: 12508 MORTONS CORNERS ROAD

City-St-Zip: SIMSBURY, CT 06070 City-St-Zip: SPRINGVILLE, NY 14141

Title: PD () Delete Title: STD (X) Change () Addition Name: JACOBI, RAYMOND Name: TIRONE, CHARLES

Address: 137 GRAYTON RD. Address: 30 STONEYBROOK DRIVE
City-St-Zip: TONAWANDA, NY 14150 City-St-Zip: WILLIAMSVILLE, NY 14221

Title: S () Delete Title: VPD (X) Change () Addition

Name:DAIGLER, GERALDName:RIGGIO, CHARLESAddress:12508 MORTONS CORNERS RDAddress:5301 WILLOW LAKE COURTCity-St-Zip:SPRINGVILLE, NY 14141City-St-Zip:CLARENCE, NY 14031

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: CHARLES TIRONE ST 04/09/2009