2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750374

FILED Jan 20, 2009 Secretary of State

Entity Name: THE BRITTANY 3575 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3575 SOUTH OCEAN BLVD. S. PALM BEACH, FL 33480 **Current Mailing Address: New Mailing Address:** 3575 SOUTH OCEAN BLVD. S. PALM BEACH, FL 33480 FEI Number: 59-2133096 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: SCHNER, LARRY ESQ 750 SOUTH DIXIE HIGHWAY BOCA RATON, FL 33432 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: () Delete () Change () Addition MANDRAS, FRANK Name: Name: 3575 S OCEAN BL #309 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: Title: Title: VPD (X) Change () Addition () Delete ISOKANGOS, MARIA-LISA Name: FRIEDMAN, BONNIE Name: Address: 3575 S OCEAN BLVD #206 Address: 3575 S OCEAN BLVD #107 City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480 Title: SD () Delete Title: SD (X) Change () Addition CLANEY, KEN TERNOSKY, MIKE Name: Name: 3575 SOUTH OCEAN BL SUITE 303 3575 SOUTH OCEAN BL SUITE 101 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480 Title: TD () Delete Title: TD (X) Change () Addition Name: FRIEDMAN, BONNIE Name: PARTON, JOE 3575 SOUTH OCEAN BL SUITE 109 Address: 3575 SOUTH OCEAN BL SUITE 407 Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480 Title: () Delete Title: (X) Change () Addition TERNOSKY, MIKE CLANCY, KEN Name: Name: 3575 SOUTH OCEAN BL # 101 3575 SOUTH OCEAN BL # 303 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

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: FRANK MANDRAS, PRESIDENT P 01/20/2009