2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752921

FILED Mar 30, 2008 Secretary of State

Entity Name: THE NORWOOD CONDOMINIUM ASSOCIATION, INC.

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

UNIT #3, 8800 BLIND ROAD 8800 BLIND PASS ROAD

ST. PETE BEACH, FL 33706 UNIT 3

SAINT PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

UNIT #3, 8800 BLIND PASS RD 8800 BLIND PASS ROAD

ST. PETE BEACH, FL 33706 UNIT 3

SAINT PETE BEACH, FL 33706

FEI Number: 59-2951730 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:

PREDMORE, JOHN PREDMORE II, JOHN W 8800 BLIND PASS ROAD #5 8800 BLIND PASS ROAD

ST. PETE BEACH, FL 33706 US UNIT 3

SAINT PETE BEACH, FL 33706 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: JOHN W PREDMORE II 03/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition Name: PREDMORE, JOHN W II Name: PREDMORE II, JOHN W

 Address:
 8800 BLIND PASS RD #3
 Address:
 8800 BLIND PASS ROAD UNIT 3

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 City-St-Zip:
 SAINT PETE BEACH, FL 33706

Title: TRES () Delete Title: TRES (X) Change () Addition

Name: METKER, TROY Name: METKER, TROY A

Address: 8800 BLIND PASS RD #10 Address: 8800 BLIND PASS ROAD UNIT 10 City-St-Zip: ST. PETE BEACH, FL 33706 City-St-Zip: SAINT PETE BEACH, FL 33706

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 METKER, TROY
 Name:
 METKER, TROY A

 Address:
 8800 BLIND PASS RD #6
 Address:
 8800 BLIND PASS ROAD UNIT 10

 City-St-Zip:
 ST. PETE BEACH, FL 33706
 City-St-Zip:
 SAINT PETE BEACH, FL 33706

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: TROY A METKER SEC 03/30/2008