

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754774

FILED
Jan 28, 2008
Secretary of State

Entity Name: EUSTIS PLAZA CONDOMINIUMS, INC.

Current Principal Place of Business:

2815 KURT ST BOX U
EUSTIS, FL 32726 US

New Principal Place of Business:

Current Mailing Address:

2815 KURT ST BOX U
EUSTIS, FL 32726 US

New Mailing Address:

FEI Number: 59-2427356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIKES, YVONNE H
32813 LAKE EUSTIS DR
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SPIKES, YVONNE H
Address: P.O. BOX 1351
City-St-Zip: EUSTIS, FL 32727

Title: STD () Delete
Name: CORBET, GLORIA L
Address: 16035 UMATILLA PL
City-St-Zip: UMATILLA, FL 32784

Title: VD () Delete
Name: O'NEIL, CLARA L
Address: 2811- H KURT ST
City-St-Zip: EUSTIS, FL 32726

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: GLORIA L. CORBET

STD

01/28/2008

Electronic Signature of Signing Officer or Director

Date