

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754791

FILED
Mar 27, 2008
Secretary of State

Entity Name: FIRST ENCOUNTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11 NORTH J STREET #2
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

11 NORTH J STREET #2
LAKE WORTH, FL 33460 US

New Mailing Address:

FEI Number: 59-2500131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISABELL, SANDRA A
11 NORTH J STREET #3
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

ISABELL, SANDRA M
11 NORTH J STREET #2
LAKE WORTH, FL 33460 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: SANDRA M. ISABELL

03/27/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BURNS, GUY
Address: 21 LAKE ST
City-St-Zip: ELLINGTON, CT 06029

Title: PD () Delete
Name: PISECKI, ANDREW
Address: 320 SHERWOOD FOREST DR
City-St-Zip: DELRAY BCH, FL

Title: SD () Delete
Name: BURNS, JEAN
Address: 21 LAKE ST
City-St-Zip: ELLINGTON, CT 06029

Title: D () Delete
Name: PISECKI, NANCY
Address: 320 SHERWOOD FOREST DR
City-St-Zip: DELRAY BCH, FL

Title: D () Delete
Name: IAFRATE, LOUIS R
Address: 23 VIA DECASAS SUR #101
City-St-Zip: BOYNTON BEACH, FL 33426

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:

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: SANDRA M. ISABELL

R.A.

03/27/2008

Electronic Signature of Signing Officer or Director

Date