2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756070

FILED Apr 13, 2007 Secretary of State

Entity Name: EASTWOOD SHORES CONDOMINIUM NO. 6 ASSOCIATION, INC

Current Principal Place of Business:		New Principal Place of Business:		
	IGH AVE ATER, FL 3376	60 US		
urrent N	lailing Addres	s:	New Mailing Address	s:
O. BOX	14357 ATER, FL 3376	6 US		
El Number	: 59-2069873	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	d Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
	CH REALTY IN	IC		
	ELCHER RD ATER, FL 3376	S5 US		
he above	ELCHER RD ATER, FL 3376		purpose of changing its registere	d office or registered agent, or both
LEARW he above the State	ELCHER RD ATER, FL 3376 anamed entity se of Florida.		purpose of changing its registere	d office or registered agent, or both
LEARW he above the State	ELCHER RD ATER, FL 3376 e named entity s e of Florida. RE:			d office or registered agent, or both Date
the above the Stati	ELCHER RD ATER, FL 3376 e named entity s e of Florida. RE:	submits this statement for the library is sta	ent	d office or registered agent, or both Date ES TO OFFICERS AND DIRECTO
the above the Stati	e named entity se of Florida. RE: Electron S AND DIREC	submits this statement for the side of the side of Registered Agronal Forces: Delete RRIE VE APT A	ent	Date
the above the State GNATU PFFICER ittle: ame: ddress:	e named entity se of Florida. RE: Electron S AND DIRECTOR PD () EDWARDS, LO 2939 BOUGH A' CLEARWATER,	ic Signature of Registered Ag FORS: Delete RRIE VE APT A FL 33760 Delete ILA AVE	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the 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: LORRIE EDWARDS PD 04/13/2007