2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# 756581

Entity Name: COMMODORE BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13536 GULF BLVD
MADEIRA BCH, FL 33708

New Principal Place of Business:

Current Mailing Address:

13536 GULF BLVD
MADEIRA BCH, FL 33708

New Mailing Address:

FEI Number: 59-2202188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KERSTEEN, ROBERT
2821 61ST LN NO
ST PETERSBURG, FL 33565 US

Name and Address of New Registered Agent:

JONES, CHRISTIE
2964 KENNILWICK DR S
CLEARWATER, FL 337613316 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: CHRISTIE S. JONES 01/15/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: BMDS ( ) Delete
Name: PANKOW, BETH
Address: 8280 ROBIN RD.
City-St-Zip: LARGO, FL 34647

Title: BMDP ( ) Delete
Name: KERSTEEN, ROBERT,
Address: 2821 615 LANE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D ( ) Delete
Name: MAAS, JOE
Address: 6450 SHORELINE DR UNIT 904
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: BMD ( ) Delete
Name: GRAY, LESLIE
Address: 1308 55TH ST S
City-St-Zip: GULFPORT, FL 33707

Title: T ( ) Delete
Name: HAINISCH, RICHARD
Address: 8520 GARDENIA DR
City-St-Zip: SEMINOLE, FL 33777

Title: AS ( ) Delete
Name: ADAMS, THOMAS D
Address: 3804 GULF BLVD
City-St-Zip: SAINT PETERSBURG, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CLARK, THOMAS
Address: 1532 HEIGHTS LA
City-St-Zip: LONGWOOD, FL 32750

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: THOMAS D. ADAMS AS 01/15/2009
Electronic Signature of Signing Officer or Director Date