2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 758459

Entity Name: ENGLEWOOD ISLES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1811 ENGLWOOD RD
BOX 240
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

1811 ENGLWOOD RD
BOX 240
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 59-2350168 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOITOZZA, RICHARD
607 PINENTDLE LANE
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

MILLER, DAVID
301 GLADSTONE BLVD
ENGLEWOOD, FL 34223 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: DAVID MILLER 04/30/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MOLTOZZA, RICHARD
Address: 607 PINENTDLE LANE
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: VD ( ) Delete
Name: SWAGMAN, RON
Address: 215 ROCKWOOD WAY
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: SD ( ) Delete
Name: FREDERICK, MARY-LOU
Address: 346 EDEN DRIVE
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: TD ( ) Delete
Name: GOODWIN, JOANNE
Address: 327 GLADETONE BLVD
City-St-Zip: ENGLEWOOD, FL 34223 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ALEXANDER, CAROLYN
Address: 329 GLADSTONE BLVD
City-St-Zip: ENGLEWOOD, FL 342231985 US

Title: VD (X) Change ( ) Addition
Name: MILLER, DAVID
Address: 301 GLADSTONE BLVD
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: SD (X) Change ( ) Addition
Name: PIERANO, FELICIA
Address: 390 EDEN DRIVE
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: TD (X) Change ( ) Addition
Name: GOODWIN, JOANNE
Address: 327 GLADSTONE BLVD
City-St-Zip: ENGLEWOOD, FL 342231985 US

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: CAROLYN ALEXANDER PD 04/30/2008
Electronic Signature of Signing Officer or Director Date