2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758459

FILED Jul 10, 2009 Secretary of State

Entity Name: ENGLEWOOD ISLES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1811 ENGLWOOD RD 1811 ENGLEWOOD RD

BOX 240 BOX 240

ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 US

Current Mailing Address: New Mailing Address:

1811 ENGLWOOD RD **BOX 240**

ENGLEWOOD, FL 34223 LIS

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, DAVID 301 GLÁDSTONE 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ALEXANDER, CAROLYN MILLER, DAVID Name: Name:

329 GLADSTONE BLVD Address: 301 GLADSTONE BLVD Address:

City-St-Zip: ENGLEWOOD, FL 342231985 US City-St-Zip: ENGLEWOOD, FL 342231985 US

Title: VD () Delete Title: (X) Change () Addition DURRANT, GEORGE MILLER, DAVID Name: Name: Address: 301 GLADSTONE BLVD Address: 345 GLADSTONE BLVD City-St-Zip: ENGLEWOOD, FL 34223 US City-St-Zip: ENGLEWOOD, FL 34223 US

Title: () Delete Title: SD (X) Change () Addition

PIERANO, FELICIA NEWBY, CAROL Name: Name: 390 EDEN DRIVE 456 DOVER DRIVE SOUTH Address: Address:

City-St-Zip: ENGLEWOOD, FL 34223 US City-St-Zip: ENGLEWOOD, FL 34223 US

Title: TD () Delete Title: TD (X) Change () Addition

Name: GOODWIN, JOANNE Name: BAILEY, CAROL

327 GLADSTONE BLVD 301 GLADSTONE BLVD Address: Address:

City-St-Zip: ENGLEWOOD, FL 342231985 US 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: DAVID MILLER PD 07/10/2009