

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763449

FILED
Apr 29, 2009
Secretary of State

Entity Name: EASTFIELD SLOPES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9529 FIELDVIEW CIRCLE
THONOTOSASSA, FL 33592 US

New Principal Place of Business:

9519 FIELDVIEW CIRCLE
THONOTOSASSA, FL 33592 US

Current Mailing Address:

PO BOX 1486
THONOTOSASSA, FL 33592 US

New Mailing Address:

FEI Number: 59-2490833 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BOUTZOUKAS, MICHAEL E
111 N. BELCHER RD. STE 201
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

HAMILTON, DANIEL W
4502 ETHAN WAY
PLANT CITY, FL 33563 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: DANIEL W. HAMILTON

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEARD, RON
Address: 9513 FIELDVIEW CIRCLE
City-St-Zip: THONOTOSASSA, FL 33529

Title: SD () Delete
Name: FREEMAN, CRYSTAL
Address: 9502 LAKE PARK DR.
City-St-Zip: THONOTOSASSA, FL 33592

Title: PD () Delete
Name: STYERS, RON
Address: 9534 FIELDVIEW CIR.
City-St-Zip: THONOTOSASSA, FL 33592

Title: T () Delete
Name: ROBINSON, BAKARI M
Address: 9538 FIELD VIEW CIRCLE
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: FAISON, CRYSTAL
Address: 9502 LAKE PARK DR.
City-St-Zip: THONOTOSASSA, FL 33592

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: RON STYERS

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date