2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764093

FILED Jan 05, 2009 Secretary of State

Entity Name: EASTLAKES PROPERTY OWNERS' ASSOCIATION, INC.

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

6880 PALM GROVE CT

PALM BEACH GARDENS, FL 33418 LIS

Current Mailing Address: New Mailing Address:

6880 PALM GROVE CT

PALM BEACH GARDENS, FL 33418 US

FEI Number: 59-2211383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BONAN, ELIZABETH HARBAR, DARLENE

759 S. FEDERAL HWY STE 212 6880 PALM GROVE COURT

STUART, FL 34994 PALM BEACH GARDENS, FL 33418 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: DARLENE HARBAR, PROPERTY MGR 01/05/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition FISHMAN, ALAN FISHMAN, ALAN Name: Name: 13018 TOUCHSTONE PLACE Address: 13018 TOUCHSTONE PLACE Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33418 Title: () Delete Title: (X) Change () Addition FLAMENHOFT, HUBERT Name: GOODMAN, JOEL Name: Address: 13102 TOUCHSTONE PLACE Address: 13054 TOUCHSTONE PLACE City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33418 Title: () Delete Title: () Change () Addition

ADELSTEIN, RONALD Name: Name:

12860 OAK KNOLL DRIVE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: KASREL, JERRY Name: 6866 BRIARLAKE CIR Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

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

PEARLSTEIN, JUDITH Name: Name: 13838 PALM GROVE PLACE Address: Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: 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: RONALD ADELSTEIN Т 01/05/2009