2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765378

FILED Mar 04, 2007 Secretary of State

Entity Name: DRIFTWOOD BREAKERS CONDOMINIUM ASSOCIATION, INC.

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

3150 OCEAN DRIVE VERO BEACH, FL 32963

Current Mailing Address: New Mailing Address:

3150 OCEAN DRIVE VERO BEACH, FL 32963

FEI Number: 59-2271923 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:

RADLET, JEANNE L 3150 OCEAN DR

VERO BEACH, FL 32963 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:

Floring Complete of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 TENBUS, ROBERT,
 Name:
 TENBUS, ROBERT,

 Address:
 764 BANYAN RD
 Address:
 764 BANYAN RD

 City-St-Zip:
 VERO BEACH, FL
 32963

Title: D () Delete Title: D (X) Change () Addition Name: MCCHESNEY, DON Name: MARTINO, ANTHONY

 Name:
 MCCHESNEY, DON
 Name:
 MARTINO, ANTHO

 Address:
 3915 NW 27TH AVE
 Address:
 1100 EUCLID

 City-St-Zip:
 BOCA RATON, FL
 City-St-Zip:
 UTICA, NY 06832

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

 Name:
 GUTHRIE, BARBARA,
 Name:
 PATRICIA YAHN,

 Address:
 133 LAKE OTIS RD SE
 Address:
 6530 NAEFF ROAD

 City-St-Zip:
 WINTER HAVEN, FL
 City-St-Zip:
 FAIRVIEW, PA 16415

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 YAHN, PATRICIA
 Name:
 MILLINER, WAYNE

 Address:
 6530 NAEFF ROAD
 Address:
 270 FAIRWAYS DR

 City-St-Zip:
 FARRVIEW, PA
 City-St-Zip:
 BOWLING GREEN, KY

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

 Name:
 VOLKERT, LEON
 Name:

 Address:
 4116 N. OCEAN DR #700
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LEON H. VOLKERT STD 03/04/2007