## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765378** 

FILED Jan 24, 2008 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete TENBUS, ROBERT, YAHN, PATRICIA, Name: Name: 764 BANYAN RD Address: 6530 NAEFF ROAD Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: FAIRVIEW, PA 16415 Title: () Delete Title: (X) Change ( ) Addition MARTINO, ANTHONY Name: MARTINO, ANTHONY Name: Address: 1100 EUCLID Address: 1100 EUCLID City-St-Zip: UTICA, NY 06832 City-St-Zip: UTICA, NY 06832 Title: VPD () Delete Title: (X) Change ( ) Addition PATRICIA YAHN, MYRA LANGBEHN, Name: Name: 6530 NAEFF ROAD 1296 ST LUCIE BLVD SE Address: Address: City-St-Zip: FAIRVIEW, PA 16415 City-St-Zip: STUART, FL 32994 Title: ( ) Delete Title: () Change () Addition Name: MILLINER, WAYNE Name: Address: 270 FAIRWAYS DR Address: City-St-Zip: BOWLING GREEN, KY City-St-Zip: Title: STD () Delete Title: () Change () Addition VOLKERT, LEON Name: Name: 4116 N. OCEAN DR #700 Address: 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 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 VOLKERT STD 01/24/2008