2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #767767

1. Entity Name



FILED
Jan 24, 2008 8:00 am
Secretary of State
01-24-2008 90032 009 ****70.00

ENGLEWOOD SEACREST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business	Mailing Address				
7925 ROYAL QUEENSLAND WAY	7925 ROYAL QUEENSLAND WAY				

BRADENTON	I, FL 34202		BRADENTON, FL 342	202		Ì	,					
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2. Principal P	Place of Busine	∋ss - No P.O. Box #	3. Mailing Address		-							
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Suite, Apt.	#, etc.		Suite, Apt. #, etc.				01042008	Cha-NP	CE	R2E037 (12/	(06)	
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City & Stat		a FL	Engle wood	City & State			4. FEI Numbe 59-240			-		Applicable
Zip 0	e woo	d FL Country	1 2 6 /	2161 Count								
34.	223	Charlotte	34223	L'h	wlo th	-e	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current R	legistered Agent				7. Name and	Address of No	ew Regist	tered Agent		
MONACO-	-ROBINS I	YNN			Name -	DAL	Y, PA	tul				
	ISTITUTIO						P.O. Box Numbe		table)			
SARASOT	A, FL 342	31 🕔										
					271 ج	<u>N</u> 0	orth B	seach	Rd	<u> </u>		
					City E	Engl	e woo	d		FL 45	Code	⊋ .3
	named entity	submits this statement for ered agent.	the purpose of changing i	ts registere							with, a	ind accept
	-	-										
SIGNATURE .												
	Signature, typed o	or printed name of registered agent ar	nd title if applicable. (NO	DTE: Registere	d Agent signatu	ité required	when reinstating)			DATE		
	Filing Fed	e is \$61.25	9. Election C	ampaign F	inancing		\$5.00 May B		Make	check paya	ble to	
Due by May 1, 2008				Trust Fund Contribution.		\Box	TOTAL MICH	~	C-1-1-1-1			
	Due by M	ay 1, 2008	Trust rund	Contributi	ion.	ш	Added to Fees		riorida i	Department	of Sta	ite
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17. 2008

Daytime Phone #