2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008
Secretary of State

DOCUMENT# 768849

Entity Name: JUNGLE SHORES UNIT 6 ASSOCIATION, INC.

Current Principal Place of Business:

8253 29 AVE N
SAINT PETERSBURG, FL 33710 US

New Principal Place of Business:

Current Mailing Address:

8253 29 AVE N
SAINT PETERSBURG, FL 33710 US

New Mailing Address:

FEI Number: 59-2304010 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRUSKIN, DAVID S.
8253 29TH AVE. N.
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: BOCOUTI, PATRICIA
Address: 8220 29 AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: VP ( ) Delete
Name: ODOM, TERRY
Address: 8260 29 AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D ( ) Delete
Name: TENANT, DAVE
Address: 2901 PELHAM RD
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T ( ) Delete
Name: GRUSKIN, DAVID
Address: 8253 29 AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D ( ) Change (X) Addition
Name: BRODERICK, CARYL
Address: 2910 PELHAM RD. N.
City-St-Zip: ST PETERSBURG, FL 33370

Title: D ( ) Change (X) Addition
Name: HUNT, LIBBY
Address: 2910 PELHAM RD N
City-St-Zip: ST PETERSBURG, FL 33710

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: DAVID GRUSKIN T 04/17/2008
Electronic Signature of Signing Officer or Director — Date