

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 19, 2010
Secretary of State

Entity Name: BARCLAY SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19 INDIAN RIVER DRIVE
COCOA, FL 32922

New Principal Place of Business:

19 INDIAN RIVER DRIVE
COCOA, FL 32922 US

Current Mailing Address:

19 INDIAN RIVER DRIVE
COCOA, FL 32922

New Mailing Address:

645 CLASSIC CT
STE 104
MELBOURNE, FL 32940 US

FEI Number: 59-3723749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, CONNEE
19 INDIAN RIVER DRIVE, #601
COCOA, FL 32922 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: TREA
Name: GRAMOLINI, ROBERT
Address: 19 INDIAN RIVER DR #301
City-St-Zip: COCOA, FL 32922 US

Title: SEC
Name: MENZEL, MARY LEE
Address: 19 INDIAN RIVER DR #701
City-St-Zip: COCOA, FL 32922 US

Title: VP
Name: HOWALD, RODNEY
Address: 19 INDIAN RIVER DR #302
City-St-Zip: COCOA, FL 32922 US

Title: DIR
Name: VITAS, SHARON
Address: 19 N. INDIAN RIVER DR., #800
City-St-Zip: COCOA, FL 32922 US

Title: PRES
Name: FREEMAN, CONNEE
Address: 19 INDIAN RIVER DR. #601
City-St-Zip: COCOA, FL 32922 US

I hereby 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 all other like empowered.

SIGNATURE: CONNEE FREEMAN

PRES

04/19/2010

Electronic Signature of Signing Officer or Director

Date