2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N02000003407

Entity Name: ELIOT HOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

434 CHILIAN AVE
PALM BCH, FL 33480

New Principal Place of Business:

Current Mailing Address:

434 CHILIAN AVE
PALM BCH, FL 33480

New Mailing Address:

FEI Number: 22-3876675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EVANS, LESLIE R
214 BRAZILIAN AVE STE 200
PALM BCH, FL 33480 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: HEAVEY, WINIFRED C
Address: 434 CHILIAN AVE.
City-St-Zip: PALM BEACH, FL 33480

Title: S ( ) Delete
Name: HOUSER, TODD
Address: 434 CHILEAN AVE.,#3C
City-St-Zip: PALM BEACH, FL 33480

Title: T ( ) Delete
Name: MILLER, DIANE
Address: 434 CHILEAN AVE., #3B
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HOUSER, TODD C
Address: 434 CHILIAN AVE. #3C
City-St-Zip: PALM BEACH, FL 33480

Title: S (X) Change ( ) Addition
Name: CROWE, ROBERT
Address: 434 CHILEAN AVE.,#6D
City-St-Zip: PALM BEACH, FL 33480

Title: T (X) Change ( ) Addition
Name: GEORGIUS, JOHN
Address: 434 CHILEAN AVE., #PHB
City-St-Zip: PALM BEACH, FL 33480

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: TODD HOUSER PRES 04/13/2009

Electronic Signature of Signing Officer or Director — Date