## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003520

FILED Mar 18, 2009 Secretary of State

Entity Name: OSPREY ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O PATTI KIDDER 1061 E. INDIANTOWN ROAD

9333 OSPREY ISLES BLVD #410

WEST PALM BEACH, FL 33412 JUPITER, FL 33477

Current Mailing Address: New Mailing Address:

C/O SUNRISE MANAGEMENT C/O SUNRISE COMPANIES

1061 EAST INDIANTOWN ROAD SUITE 410 1061 EAST INDIANTOWN ROAD SUITE 410

JUPITER, FL 33477 JUPITER, FL 33477

FEI Number: 47-0865084 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:

SHENKMAN, CURTIS L DESANTIS, GASKILL, SMTIH & SHENKMAN, P.A. 11891 US HIGHWAY ONE, SUITE 100

11891 US HIGHWAY ONE, SUITE 100 JUPITER, FL 33477 NORTH PALM BEACH, FL 33408 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.

KUNKLE, CRAIG

1061 EAST INDIANTOWN RD #410

SIGNATURE: CRAIG KUNKLE 03/18/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: PANDO, ANTHONY Name: PANDO, ANTHONY

Address: 9445 OSPREY ISLES BLVD
City-St-Zip: WEST PALM BEACH, FL 33412
City-St-Zip: WEST PALM BEACH, FL 33412
City-St-Zip: WEST PALM BEACH, FL 33412

Title: STD () Delete Title: STD (X) Change () Addition Name: KIDDER, PATTI J Name: WOODY, LIZ

Address: 9333 OSPREY ISLES BLVD Address: 9622 OSPREY ISLES BLVD
City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip: WEST PALM BEACH, FL 33412

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCLEAN, WILLIAM D JR
 Name:

 Address:
 9726 OSPREY ISLES BLVD
 Address:

 City-St-Zip:
 WEST PALM BEACH, 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: TONY PANDO PD 03/18/2009

Electronic Signature of Signing Officer or Director

Date