

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000626

FILED
Mar 25, 2009
Secretary of State

Entity Name: 4550 HIGHWAY 20 EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4550 HWY 20 EAST
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

405 SPICEBUSH COURT
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 51-0445818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RITZ, THOMAS A
405 SPICEBUSH COURT
NICEVILLE, FL 32578 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: DP () Delete
Name: WALKER, WAYNE
Address: 234 RACETRACK RD NE
City-St-Zip: FT WALTON BCH, FL 32547

Title: DV () Delete
Name: DEES, EARL
Address: 512 HORSESHOE LANE
City-St-Zip: WETUNPKA, AL 36092

Title: DST () Delete
Name: RITZ, THOMAS
Address: 405 SPICEBUSH CT.
City-St-Zip: NICEVILLE, FL 32578

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:

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: THOMAS A RITZ

S/T

03/25/2009

Electronic Signature of Signing Officer or Director

Date