2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002503

FILED Feb 18, 2009 Secretary of State

Entity Name: ARTESIA TOWNHOMES CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1980 N. ATLANTIC AVE. #701 1277 S ORLANDO AV COCOA BEACH, FL 32931 COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** PO BOX 1042 PO BOX 1042 CAPE CANAVERAL, FL 32920 CAPE CANAVERAL, FL FEI Number: 43-2008745 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: FLAGSHIP ASSCOIATION MGMT, INC. DOING ASSOCIATION BUSINESS, INC 102 COLUMBIA DR. 204 408 HARRISON AV # 1 CAPE CANAVERAL, FL 32920 CAPE CANAVERAL, FL 32920 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: DOING ASSOCIATION BUSINESS, INC. 02/18/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FRIEDMAN, CHARLES Name: Name: PO BOX 7048 Address: Address: City-St-Zip: SEMINOLE, FL 33775 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: INGLES, STEVEN Name: INGLES, STEVEN Address: 408 BUCHANAN AVE Address: 408 BUCHANAN AVE City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: () Change () Addition SMITH, DWIGHT Name: Name: 3643 ASHLING DR. Address: Address: City-St-Zip: LAKELAND, FL 33803 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: STEVEN INGLES VP 02/18/2009