2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003861

FILED Apr 29, 2009 Secretary of State

Entity Name: REGATTA BAY ESTATES NEIGHBORHOOD ASSOCIATION, INC.

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

G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD, SUITE 309 LAKE WORTH, FL 33463

New Mailing Address: Current Mailing Address:

G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD, SUITE 309 LAKE WORTH, FL 33463

FEI Number: 55-0835970 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:

JAY STEVEN LEVINE PA LEVINE AND BURR, ATTORNEYS 3300 PGA BLVD., STE. 530 PALM BEACH GARDENS, FL 33410 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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete GREDSMITH, DAN GOLDSMITH, DANIEL Name: Name: 11246 MAINSAIL CT. Address: 11246 MAINSAIL CT. Address:

City-St-Zip: WELLINGTON, FL 33449 City-St-Zip: WELLINGTON, FL 33449

Title: () Delete Title: (X) Change () Addition CAFARD, GREGORY Name: CAFARO, GREGORY Name: Address: 11134 REGATTA LANE Address: 11134 REGATTA LANE City-St-Zip: WELLINGTON, FL 33487 City-St-Zip: WELLINGTON, FL 33449

Title: () Delete Title: (X) Change () Addition

LOMAX, STEVE LOMAX, STEVE Name: Name: Address: Address:

11146 MAINSAIL COURT 11146 MAINSAIL COURT City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: WELLINGTON, FL 33449

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: GREGORY CAFARO **PRES** 04/29/2009