

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007283

FILED  
Jun 16, 2009  
Secretary of State

**Entity Name:** ELLON PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1492 MARKET CIRCLE  
PORT CHARLOTTE, FL 33953

**New Principal Place of Business:**

**Current Mailing Address:**

24550 TANGELO AVE  
PORT CHARLOTTE, FL 33980

**New Mailing Address:**

**FEI Number:** 20-1595437      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BODDEN, JEFFREY E  
24550 TANGELO AVE  
PORT CHARLOTTE, FL 33980      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:**

Title: PD      ( ) Delete  
Name: BODDEN, JEFFREY E  
Address: 24550 TANGELO AVE  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VD      ( ) Delete  
Name: OLMSTED, DAVID E  
Address: 18501 MURDOCK CIRCL #101  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: STD      ( ) Delete  
Name: BODDEN, GINA C  
Address: 24550 TANGELO AVE  
City-St-Zip: PORT CHARLOTTE, FL 33980

**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: JEFFREY E. BODDEN

PD

06/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date