2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N03821

Entity Name: CASTAWAY SHORES CONDOMINIUM, INC.

Current Principal Place of Business:

2935 KIRKLAND RD.,N.E.
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

FRANCIS M STEWART, CPA
6939 N WICKHAM RD
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-2650151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, FRANCIS M CPA
6939 N. WICKHAM RD
MELBOURNE, FL 32940 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: P ( ) Delete
Name: MELVIN, LEONARD
Address: 3221 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: T ( ) Delete
Name: PARNELL, ELAINE
Address: 3229 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: V ( ) Delete
Name: BRIGGS, JAMES
Address: 3223 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: S ( ) Delete
Name: RHYNE, ANDREW
Address: 3015 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: D (X) Delete
Name: CONWAY, CHARLES K
Address: 3311 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MELVIN, LEONARD H
Address: 3221 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: T (X) Change ( ) Addition
Name: PARNELL, ELAINE T
Address: 3229 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: V (X) Change ( ) Addition
Name: BRIGGS, JAMES K
Address: 3223 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

Title: S (X) Change ( ) Addition
Name: SWAN, AILEEN P
Address: 3225 KIRKLAND RD NE
City-St-Zip: PALM BAY, FL 32905

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: MELVIN LEONARD P 03/23/2009

Electronic Signature of Signing Officer or Director — Date