2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# N04000000606

Entity Name: LIME BAY MANAGEMENT GROUP, INC.

Current Principal Place of Business:

9190 LIME BAY BOULEVARD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

4800 N. STATE RD 7
F 105
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: 76-0751193 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 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: PD ( ) Delete
Name: RUSSO, URSS
Address: 9330 LIME BAY BLVD., #307
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: FELDBERG, MARSHA
Address: 9201 LIME BLVD., #214
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: GUTTENBERG, ELIZABETH
Address: 9351 LIME BAY BLVD., #209
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: BEARMAN, ROSLYN
Address: 9351 LIME BLVD., #209
City-St-Zip: TAMARAC, FL 33321

Title: TD ( ) Delete
Name: GERALD, KAYE
Address: 9080 LIME BAY BLVD., #105
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: BAUER, PAUL
Address: 9070 LIME BAY BLVD #204
City-St-Zip: TAMARAC, FL 33321

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:

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: URSS RUSSO PD 03/05/2009

Electronic Signature of Signing Officer or Director — Date