2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2008
Secretary of State

DOCUMENT# N04000008806

Entity Name: BOURBON ST. BUNGALOWS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

684 DELMAR TERR. S.
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

668 DELMAR TERR S
SAINT PETERSBURG, FL 33701

Current Mailing Address:

684 DELMAR TERR. S.
SAINT PETERSBURG, FL 33701

New Mailing Address:

668 DELMAR TERR S
SAINT PETERSBURG, FL 33701

FEI Number: 20-2625017 **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:

AUVIL, JONATHAN L
37837 MERIDIAN AVE SUITE 314
DADE CITY, FL 33525 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: DPO ( ) Delete
Name: SKOREWICZ, KEITH
Address: 684 DELMAR TERR.S.
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: DT ( ) Delete
Name: WAGNER, LUIS
Address: 668 DELMAR TERR S
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: DV ( ) Delete
Name: OLINICK, DEBRA
Address: 664 DELMAR TERR. S.
City-St-Zip: SAINT PETERSBURG, FL 33701

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: KEITH SKOREWICZ PRES 05/15/2008

Electronic Signature of Signing Officer or Director — Date