2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# N05000008494

Entity Name: MORNINGSIDE EAST II CONDO. ASSOCIATION, INC.

Current Principal Place of Business:

2560 HARN BLVD
CLEARWATER, FL 33764

New Principal Place of Business:

2560 HARN BLVD
#24
CLEARWATER, FL 33764

Current Mailing Address:

2560 HARN BLVD
CLEARWATER, FL 33764

New Mailing Address:

2560 HARN BLVD
#24
CLEARWATER, FL 33764

FEI Number: 59-1690122 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURNS, DOUGLAS
2559 NURSERY RD. STE A
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

BURNS, DOUGLAS
2559 NURSERY ROAD
SUITE A
CLEARWATER, FL 33764 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: DOUGLAS J. BURNS 02/26/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STONEY, LEE
Address: 2560 HARO BLVD
City-St-Zip: CLEARWATER, FL 33764

Title: D ( ) Delete
Name: MICHAEL, SCOTTIE
Address: 2560 HARN BLVD
City-St-Zip: CLEARWATER, FL 33764

Title: B (X) Delete
Name: DICKINSON, PAIGE
Address: 2560 HARN BLVD
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MICHAEL, SCOTTIE
Address: 2560 HARN BLVD
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Change ( ) Addition
Name: LOWERY, MARIE
Address: 2560 HARN BLVD
City-St-Zip: CLEARWATER, FL 33764

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: SCOTTIE MICHAEL D 02/26/2009
Electronic Signature of Signing Officer or Director Date