2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010587

FILED Apr 28, 2008 Secretary of State

Entity Name: BECKETT WAY TOWNHOME ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

STERLING MGMT. 28100 US HIGHWAY 19 NORTH

STE 100 STE 305

SAINT PETERSBURG, FL 33716 CLEARWATER, FL 33716

Current Mailing Address: New Mailing Address:

2870 SCHERER DR. N 28100 US HIGHWAY 19 NORTH

STE 100 STE 305

SAINT PETERSBURG, FL 33716 CLEARWATER, FL 33716

FEI Number: 11-3764813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CONTERILL, RONALD FREDA, ALBERTO

2701 N. ROĆKY POINT DR., STE. 900 28100 ÚS HIGHWAY 19 NORTH, SUITE 305

1010 N. FLORIDA AVE. SUITE 305

TAMPA, FL 33602 US CLEARWATER, FL 33761 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: ALBERTO FREDA 04/28/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: PD (X) Change () Addition

Name: EICHHOLT, DUSTY Name: MILES, SARAH

 Address:
 600 N. WESTSHORE BLVD., STE. 400
 Address:
 1524 HILLVIEW LANE

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:
 TARPON SPRINGS, FL 34689

Title: DV () Delete Title: VPD (X) Change () Addition

Name: CACHON, MICHAEL Name: HILLSTROM, MICHAEL Address: 600 N. WESTSHORE BLVD., STE. 400 Address: 1561 HILLVIEW LANE

City-St-Zip: TAMPA, FL 33609 City-St-Zip: TARPON SPRINGS, FL 34689

Title: DST () Delete Title: SD (X) Change () Addition

Name:MIDDLETON, HEATHERName:BERNSTEIN, CONNIEAddress:600 N. WESTSHORE BLVD., STE 400Address:1500 HILLVIEW LANE

City-St-Zip: TAMPA, FL 33609 City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Delete Title: TD () Change (X) Addition

 Name:
 Name:
 NICHOLS, RAYMOND

 Address:
 Address:
 1554 HILLVIEW LANE

 City-St-Zip:
 City-St-Zip:
 TARPON SPRINGS, FL 34689

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: SARAH MILES PD 04/28/2008