2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011526

Apr 21, 2009 Secretary of State

Entity Name: CARROLLWOOD COVE AT EMERALD GREENS CONDOMINIUM ASSOCIATION, INC.

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

2870 EHRLICH ROAD 2870 SCHERER DR.

STE 100 STE 100

SAINT PETERSBURG, FL 33716 SAINT PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

2870 SCHERER ROAD 2870 EHRLICH ROAD

STE 100 STE 100

SAINT PETERSBURG, FL 33716 SAINT PETERSBURG, FL 33716

FEI Number: 20-4074010 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

Address:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete LAMOTTE, BRUCE LAMOTTE, BRUCE Name:

Name: 212 WEST VAN BUREN, SUITE 250 Address:

212 WEST VAN BUREN 9TH FLOOR Address: CHICAGO, IL 60607

City-St-Zip: City-St-Zip: CHICAGO, IL 60607

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

KNIGHT, CRAIG Name: KNIGHT, CRAIG Name: Address: 212 W. VON BUREN 7TH FL Address:

212 WEST VAN BUREN, SUITE 250 City-St-Zip:

CHICAGO, IL 60607 City-St-Zip: CHICAGO, IL 60607

Title: () Delete Title: () Change () Addition Name:

STONE, MARK Name: 14622 PARCLUB CIR Address: City-St-Zip: TAMPA, FL 33618 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: BRUCE LAMOTTE Ρ 04/21/2009