2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012245

FILED Mar 10, 2009 Secretary of State

Entity Name: PALM COAST RESORT CONDOMINIUM ASSOCIATION, INC.

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

1064 GREENWOOD BOULEVARD C/O MAY MANAGEMENT SERVICES, INC

SUITE 200 5455 A1A SOUTH

LAKE MARY, FL 32746 ST. AUGUSTINE, FL 32080

New Mailing Address: **Current Mailing Address:**

1064 GREENWOOD BOULEVARD C/O MAY MANAGEMENT SERVICES, INC.

SUITE 200 5455 A1A SOUTH

LAKE MARY, FL 32746 ST. AUGUSTINE, FL 32080

FEI Number: 20-3969809 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:

MAY MANAGEMENT SERVICES 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

NICKER, SARAH COLON, SCOTT Name: Name: 12740 GRAN BAY PKWY STE 2400 Address: 5455 A1A SOUTH Address:

City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: ST. AUGUSTINE, FL 32080

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

Name: HINTON, WES Name: HATE, CINDY Address: 12740 GRAN BAY PKWY STE 2400 Address: 5455 A1A SOUTH

City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: ST. AUGUSTINE, FL 32080

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

BOYD, LISA Name: DROBOT, ANN Name: 12740 GRAN BAY PKWY STE 2400 5455 A1A SOUTH Address: Address:

City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: ST. AUGUSTINE, FL 32080

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: ANN DROBOT ST 03/10/2009