2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# N05215

Entity Name: SHIPWATCH FIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11900 SHIPWATCH DR
LARGO, FL 33774 US

New Principal Place of Business:

Current Mailing Address:

11900 SHIPWATCH DR
LARGO, FL 33774 US

New Mailing Address:

FEI Number: 59-2557900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMMUNITY MGMT CONCEPTS, INC
4175 E BAY DR
SUITE 205
CLEARWATER, FL 33764 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: D ( ) Delete
Name: SEEFIELD, MOLLY
Address: 11440 HARBIR WAY #5016
City-St-Zip: LARGO, FL 33774

Title: SD ( ) Delete
Name: WELLS, KAREN
Address: 11440 HARBOR WAY #5009
City-St-Zip: LARGO, FL 33774

Title: D ( ) Delete
Name: ANDERSON, M
Address: 11440 HARBOR WY
City-St-Zip: LARGO, FL 33774

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WELLS, TED
Address: 11440 HARBOR WAY UNIT 5009
City-St-Zip: LARGO, FL 33774

Title: SD (X) Change ( ) Addition
Name: WASKO, VIRGIL
Address: 11440 HARBOR WAY #5003
City-St-Zip: LARGO, FL 33774

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP/T ( ) Change (X) Addition
Name: STULER, LARRY
Address: 11440 HARBOR WAY UNIT 5010
City-St-Zip: LARGO, FL 33774

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: TED WELLS P 02/24/2009

Electronic Signature of Signing Officer or Director — Date