

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003833

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** EAGLE BAY OF OSCEOLA COUNTY MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

241 RUBY AVE  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

241 RUBY AVENUE  
KISSIMMEE, FL 34741 US

**Current Mailing Address:**

241 RUBY AVE  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

241 RUBY AVENUE  
KISSIMMEE, FL 34741 US

FEI Number: 20-4534176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC.  
231 RUBY AVE  
SUITE A  
KISSIMMEE, FL 34741 US

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

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC.  
241 RUBY AVENUE  
KISSIMMEE, FL 34741 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: MARK HILLS

04/26/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WILLIAMS, LARRY W  
Address: 1085 WEST MORSE BOULEVARD  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VPD  
Name: BARRETT, WILLIAM  
Address: 1085 WEST MORSE BOULEVARD  
City-St-Zip: WINTER PARK, FL 32789 US

I hereby 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 all other like empowered.

SIGNATURE: MARK HILLS

MR

04/26/2010

Electronic Signature of Signing Officer or Director

Date