2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000004418

FILED Oct 03, 2008 Secretary of State

Entity Name: AUGUSTINE ON THE PARK CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 136 GEORGETOWN AVENUE ROSEMARY BEACH, FL 32461 **Current Mailing Address: New Mailing Address:** PO BOX 611207 ROSEMARY BEACH, FL 32461 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEW ORCHARD RESORT SERVICES, LLC LIVE SIMPLE, INC 136 GEORGETOWN AVENUE 136 GEORGÉTOWN AVENUE ROSEMARY BEACH, FL 32461 ROSEMARY BEACH, FL 32461 US 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: JASON SIEN 10/03/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STRADINGER, JOE Name: Name: 136 GEORGETOWN AVENUE Address: Address: City-St-Zip: ROSEMARY BEACH, FL 32461 City-St-Zip: Title: VD () Delete Title: () Change () Addition CLENDENIN, PHILLLIP Name: Name: Address: 136 GEORGETOWN AVENUE Address: City-St-Zip: ROSEMARY BEACH, FL 32461 City-St-Zip: Title: STD () Delete Title: (X) Change () Addition BILL, LAUTERBACH STEPHEN, GIDIERE Name: Name: 136 GEORGETOWN AVENUE 136 GEORGETOWN AVENUE Address: Address: City-St-Zip: ROSEMARY BEACH, FL 32461 City-St-Zip: ROSEMARY BEACH, FL 32461 Title: () Delete Title: () Change () Addition SHUSHAN, SALLY Name: Name: 136 GEORGETOWN AVENUE Address: Address: City-St-Zip: ROSEMARY BEACH, FL 32461 City-St-Zip: Title: () Delete Title: () Change () Addition CRISSLER, BOB Name: Name: 136 GEORGETOWN AVENUE Address: Address: City-St-Zip: ROSEMARY BEACH, FL 32461 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: JOE STRADINGER PD 10/03/2008