


2008 ~~NOT-FOR-PROFIT~~ CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 08:00 A
Secretary of State

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| DOCUMENT # N06000005728 |  |
| 1. Entity Name MELALEUCA CONDOMINIUM ASSOCIATION, INC. | |

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| Principal Place of Business 103 BROOKHAVEN COURT PALM BEACH GARDENS FL 33418 | Mailing Address 103 BROOKHAVEN COURT PALM BEACH GARDENS FL 33418 |
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|---|---------|---------------------------|---------|
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

1st MOORE CR2E037 (10/07)

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|---|--|
| 6. Name and Address of Current Registered Agent | |
| DESANTIS, CONRAD J ESQ. 11891 U.S. HIGHWAY ONE SUITE 100 NORTH PALM BEACH FL 33408 | |

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| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | |
| FL | Zip Code |

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| 8. 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. I am familiar with, and accept the obligations of registered agent. | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and if not applicable.</small> | DATE _____ <small>(NOTE: Non-stated Agent signature is required when reinstating)</small> |

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| FILE NOW: FEE IS \$61.25 Due By May 1, 2008 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make Check Payable to Florida Department of State |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|--|---|---|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P/S TART, CHET 103 BROOKHAVEN COURT PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition U000000855110 03/27/08-80037-004 61.25 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP/T TART, NANCY 103 BROOKHAVEN COURT PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | |
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SIGNATURE:

Chetu R Taur

3-10-2008