2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N06000008448

Entity Name: ONE SINGER ISLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5310 N OCEAN DR
SINGER ISLAND, FL 33404

New Principal Place of Business:

Current Mailing Address:

5310 N OCEAN DR
SINGER ISLAND, FL 33404

New Mailing Address:

FEI Number: 20-5354163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FALKENBERG, ELKE
5310 N OCEAN DR
#801
WEST PALM BEACH, FL 33404 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: PD ( ) Delete
Name: BALLESTAS, VICTOR
Address: 11601 KEW GARDENS AVE 101
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD ( ) Delete
Name: LIPES, EDWARD
Address: 5310 N OCEAN DR #1001
City-St-Zip: SINGER ISLAND, FL 33404

Title: VD ( ) Delete
Name: SNOW, ROBIN
Address: 11601 KEW GARDENS AVE 101
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: RICE, SUZANNE
Address: 5310 N. OCEAN DR., #801
City-St-Zip: SINGER ISLAND, FL 33404

Title: PD (X) Change ( ) Addition
Name: LIPES, EDWARD
Address: 5310 N OCEAN DR #1001
City-St-Zip: SINGER ISLAND, FL 33404

Title: V/S (X) Change ( ) Addition
Name: SCHULTE, MICHAEL
Address: 5310 N. OCEAN DR., #302
City-St-Zip: SINGER ISLAND, FL 33404

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: NED LIPES PRES 01/06/2009

Electronic Signature of Signing Officer or Director — Date