2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001720

FILED Apr 29, 2008 Secretary of State

Entity Name: ANGLER AVENUE PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

215 ANGLER AVENUE 208 ANGLER AVENUE PALM BEACH, FL 33480 PALM BEACH, FL 33480

Current Mailing Address: New Mailing Address:

215 ANGLER AVENUE 208 ANGLER AVENUE PALM BEACH, FL 33480 PALM BEACH, FL 33480

FEI Number: 74-3258282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TARONE, THEODORE T JR 180 ROYAL PALM WAY STE 201 PALM BEACH, FL 33401 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:

· _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 MRS.
 (X) Change () Addition

 Name:
 RUSSELL-WHEELER, VICKIE
 Name:
 BRESNAN, EILEEN

 Address:
 215 ANGLER AVENUE
 Address:
 208 ANGLER AVENUE

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
 PALM BEACH, FL 33480

Title: D () Delete Title: MRS. (X) Change () Addition

 Name:
 MORRIS, EILEEN
 Name:
 WHEELER, VICKI

 Address:
 208 ANGLER AVENUE
 Address:
 215 ANGLER AVENUE

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
 PALM BEACH, FL 33480

Title: D () Delete Title: MR. (X) Change () Addition

 Name:
 QUINNS, JOHN (CHIP)
 Name:
 QUINN, JOHN (CHIP)

 Address:
 227 ANGLER AVENUE
 Address:
 227 ANGLER AVENUE

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
 PALM BEACH, FL 33480

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: EILEEN BRESNAN MRS. 04/29/2008