2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010259

FILED Apr 06, 2009 Secretary of State

Entity Name: HUDSON CROSSING CONDOMINIUM ASSOCIATION, INC.

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

4370 S. TAMIAMI TRAIL 530 S. ORANGE AVE. SARASOTA, FL 34236 #102

SARASOTA, FL 34231

New Mailing Address: Current Mailing Address:

CASEY CONDO MANAGEMENT 4370 S. TAMIAMI TRAIL, SUITE 102 4370 S. TAMIAMI TRAIL #102 SARASOTA, FL 34231 SARASOTA, FL 34231

FEI Number: 26-1530874 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:

CASEY MGMT. 4370 S. TAMIAMI TRAIL #102 SARASOTA, FL 34231 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:

(X) Change () Addition () Delete ROSENBLUM, HARY K ROBINSON, GEORGE Name: Name: 530 SOUTH ORANGE AVENUE Address: 888 S. ORANGE AVE. #3B Address:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

(X) Change () Addition Title: VSTD () Delete Title: GRAHAM, GEORGE A Name: MANDLE, JYTTE Name:

Address: 666 THIRD AVENUE, 26TH FLOOR Address: 888 S. ORANGE AVE. #2B City-St-Zip: NEW YORK, NY 10017 City-St-Zip: SARASOTA, FL 34236

Title: () Delete Title: (X) Change () Addition

GRAHAM, ELIZABETH O CLOSSHEY, JENNIFER Name: Name: Address: 1105 PARK AVENUE. APT. 8D Address: 2111 N. GOLF VIEW DR City-St-Zip: NEW YORK, NY 10128 City-St-Zip: PLANT CITY, FL 33566

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: GEORGE ROBINSON PD 04/06/2009