

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 11, 2008  
Secretary of State**

DOCUMENT# N07414

Entity Name: LEMON BAY BREEZES MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

1401 MCCALL ROAD, UNIT 309A  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

1401 MCCALL ROAD, UNIT 309A  
ENGLEWOOD, FL 34223

**New Mailing Address:**

FEI Number: 65-0146484      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KEUKER, OSCAR A. F.  
1931 TAMIAMI TRAIL, STE. 12  
PORT CHARLOTTE, FL 33948      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: D      ( ) Delete  
Name: STENGER, JOHN  
Address: 407 E. MARION AVE., #101 MR. OAKS  
City-St-Zip: PUNTA GORDA, FL 33950

Title: PD      ( ) Delete  
Name: BARTOLI, ROSARIO  
Address: 1401 S MCCALL RD #308A  
City-St-Zip: ENGLEWOOD, FL 34223

Title: STD      ( ) Delete  
Name: EISENBEIS, GERALD  
Address: 1401 S MCCALL RD #105A  
City-St-Zip: ENGLEWOOD, FL 34223

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: OSCAR A KEUKER, CAM

CAM

03/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date