2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07533

FILED Mar 27, 2008 Secretary of State

Entity Name: THE PURPLE MARTIN CONDOMINIUM ASSOCIATION, INC.

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

3245 PURPLE MARTIN DR PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

C/O PURPLE MARTIN CONDOMINIUM ASSOCIATION 3245 PURPLE MARTIN DRIVE PUNTA GORDA, FL 33950 US

FEI Number: 35-9058445 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:

STENCIL-WORCH, KATHLEEN R TD

3245 PURPLE MARTIN DR.

#6

LUDVIG, MARIE Z SD

3245 PURPLE MARTIN DR.

#6

PUNTA GORDA, FL 33950 US PUNTA GORDA, FL 33950 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: MARIE Z. LUDVIG 03/27/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 CICCONE, JOHN,
 Name:
 OAKLEY, RICHARD,

 Address:
 341 CLEARWATER COURT #3
 Address:
 3245 PURPLE MARTIN DRIVE

 City-St-Zip:
 CAROL STREAM, IL 60188 US
 City-St-Zip:
 PUNTA GORDA, FL 33950 US

Title: SD () Delete Title: () Change () Addition

 Name:
 LUDVIG, MARIE,
 Name:

 Address:
 3245 PURPLE MARTIN DRIVE #2
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950 US
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 STENCIL-WORCH, KATHL, EEN
 Name:

 Address:
 3245 PURPLE MARTIN DR #6
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950 US
 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: RICHARD OAKLEY PD 03/27/2008