2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07783

FILED Mar 30, 2010 Secretary of State

Entity Name: ALAMEDA ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

PROGRESSIVE COMMUNITY MGMT 1801 GLENGARY ST. - FL. 1 SARASOTA, FL 34231 US MANAGEMENT SERVICES OF VENICE 530 US HIGHWAY 41 BYPASS SOUTH

VENICE, FL 34285

Current Mailing Address:

New Mailing Address:

PROGRESSIVE COMMUNITY MGMT 1801 GLENGARY ST. - FL. 1 MANAGEMENT SERVICES OF VENICE

PO BOX 595

VENICE, FL 34284 US

SARASOTA, FL 34231 FEI Number: 59-2294634

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PROGRESSIVE COMMUNITY MGMT INC 1801 GLENGARY ST. - FL. 1 SARASOTA, FL 34231 US MANAGEMENT SERVICES OF VENICE 530 US HIGHWAY 41 BYPASS SOUTH

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: CYNTHIA OGRADY

03/30/2010

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

Title: AT

Name: ORR, PAUL

Address: 35 S. BUENA VISTA AVE City-St-Zip: ENGLEWOOD, FL 34223

Title: VF

Name: WALL, DON Address: 3 N. ESPLANADE

City-St-Zip: ENGLEWOOD, FL 34223

Title: PRES Name: ECKLER, KAY

Address: 6 N. ESPLANADE
City-St-Zip: ENGLEWOOD, FL 34223

City-St-Zip. ENGLEVVOOD, FL 3422

Title:

Name: EWELES, HOWARD
Address: 1 ALAMEDA GRANDE
City-St-Zip: ENGLEWOOD, FL 34223

Title:

Name: BAILEY, DONNA
Address: 1 ALAMEDA GARNDE
City-St-Zip: ENGLEWOOD, FL 34223

Title:

Name: CYNTHIA, OGRAD Address: PO BOX 595 City-St-Zip: VENICE, FL 34284

I hereby 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 all other like empowered.

SIGNATURE: KAY ECKLER P 03/30/2010