2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002335

Entity Name: 101 EOLA CONDOMINIUMS ASSOCIATION, INC.

FILED Mar 19, 2009 Secretary of State

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

% JOY P EWERTZ, ESQ 101 EOLA CONDOMINIUM ASSOCIATION, INC 37 NORTH ORAGE AVENUE, SUITE 500 101 S EOLA DR

ORLANDO, FL 32801 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

% JOY P EWERTZ, ESQ 101 EOLA CONDOMINIUM ASSOCIATION, INC 37 NORTH ORAGE AVENUE. SUITE 500 101 S EOLA DR

37 NORTH ORAGE AVENUE, SUITE 500 101 S EOLA DR ORLANDO, FL 32801 ORLANDO, FL 32801

FEI Number: 26-2148971 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:

EWERTZ, JOY P ESQ.

390 NORTH ORANGE AVENUE

\$1 || TE 2300

SUITE B

SUITE 2300 SUITE B
ORLANDO, FL 32801 US ORLANDO, FL 32801 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: CHANCE GORDY 03/19/2009

Electronic Signature of Registered Agent Date

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

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

 Name:
 GORDY, CHANCE
 Name:
 GORDY, CHANCE

 Address:
 300 SOUTH EOLA DRIVE
 Address:
 205 SOUTH EOLA DRIVE SUITE B

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete Title: TD (X) Change () Addition Name: PAGE, JOHN Name: GORDY, HUNTER

 Address:
 300 SOUTH EOLA DRIVE
 Address:
 205 SOUTH EOLA DRIVE SUITE B

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

Title: SD () Delete Title: SD (X) Change () Addition Name: GORDY, HUNTER Name: BRACCO, TRACEY

Address: 300 SOUTH EOLA DRIVE Address: 101 SOUTH EOLA DRIVE #802

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

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: CHANCE GORDY PD 03/19/2009