2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N08000004602

Entity Name: OS INVERNESS LAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% PRIVATE RESTAURANT PROPERTIES, LLC
2202 N WEST SHORE BLVD, SUITE 475
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

% PRIVATE RESTAURANT PROPERTIES, LLC
2202 N WEST SHORE BLVD, SUITE 475
TAMPA, FL 33607

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

D2 LAW GROUP P.L.
3239 HENDERSON BOULEVARD
SECOND FLOOR
TAMPA, FL 33609 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: PD ( ) Delete
Name: BREMER, KAREN C
Address: % 2202 N WEST SHORE BLVD, SUITE 475
City-St-Zip: TAMPA, FL 33607

Title: VPD ( ) Delete
Name: RENNINGER, RICHARD L
Address: % 2202 N WEST SHORE BLVD, SUITE 475
City-St-Zip: TAMPA, FL 33607

Title: STD ( ) Delete
Name: LIMRIC, TERRIE
Address: 727 SAMANTHA DRIVE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change ( ) Addition
Name: LIMRIC, THERESA C
Address: 2231 HWY 44W STE 205
City-St-Zip: INVERNESS, FL 34453

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: THERESA C. LIMRIC STD 04/15/2009

Electronic Signature of Signing Officer or Director — Date