2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2009
Secretary of State

DOCUMENT# N11307

Entity Name: GALLEON BAY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2440 SE FEDERAL HWY
SUITE V
STUART, FL 34994

New Principal Place of Business:

10 CENTRAL PARKWAY
SUITE 111
STUART, FL 34994

Current Mailing Address:

2440 SE FEDERAL HWY
SUITE V
STUART, FL 34994

New Mailing Address:

P O BOX 531
HOBE SOUND, FL 33475

FEI Number: 65-0056477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ON ACCOUNT, INC.
2440 SE FEDERAL HWY
SUITE V
STUART, FL 34994 US

Name and Address of New Registered Agent:

ON ACCOUNT, INC.
10 CENTRAL PARKWAY
SUITE 111
STUART, FL 34994 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: _____ 04/04/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MARSHALL, PAT
Address: 103 S US HWY ONE, SUITE 5A
City-St-Zip: JUPITER, FL 33477

Title: VD ( ) Delete
Name: SHAW, HOWARD
Address: 1145 NE BOURBON DR
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete
Name: FRICK, KAREN
Address: 21 PALM ROAD
City-St-Zip: SEWELL'S POINT, FL 34996

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: PAT MARSHALL PD 04/04/2009
Electronic Signature of Signing Officer or Director — Date