2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20853

FILED Jan 23, 2009 Secretary of State

Entity Name: EGRET ISLE MAINTENANCE ASSOCIATION, INC.

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

5480 EGRET ISLE TERRACE LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

5480 EGRET ISLE TRAIL LAKE WORTH, FL 33467 US

FEI Number: 65-0085366 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:

BELCHER, ANTHONY W 8645 EGRET ISLE TERR LAKE WORTH, FL 33467

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

VACCA, PATRICIA SCIANDRA, BARBARA Name: Name: 5534 EGRET ISLE TRAIL Address: 5581 EGRET ISLE TRAIL Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

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

FORMAN, JEFFREY Name: Name: Address: 8863 EGRET ISLE PT Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

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

BELCHER, ANTHONY BELCHER, ANTHONY Name: Name: 8645 EGRET ISLE TERRACE Address: 8645 EGRET ISLE TERRACE Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

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

Name: DELGADO, MARIO Name: DELGADO, MARIO 5535 EGRET ISLE TRAIL Address: Address: 5535 EGRET ISLE TRAIL City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

Title: VD () Delete Title: () Change () Addition

DRMMOND, JAMES Name: Name: 8711 EGRET ISLE TERR Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

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

CASSIDY, ROBERT Name: Name: Address: Address: 8717 EGRET ISLE TERR LAKE WORTH, FL 33467 City-St-Zip: 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: ANTHONY BELCHER C 01/23/2009