2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21106

Entity Name: C.S.C. CONDOMINIUM ASSOCIATION, INC.

FILED Apr 30, 2009 Secretary of State

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

301 HOSPITAL AVENUE 301 HOSPITAL AVENUE STUART, FL 34994 US

Current Mailing Address: New Mailing Address:

P.O. BOX 9010 P.O. BOX 9010

STUART, FL 349959010 STUART, FL 34995 US

FEI Number: 59-2843163 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:

HARMAN, RICHMOND M.

301 HOSPITAL AVE

301 HOSPITAL AVE

301 HOSPITAL AVE

STUART, FL 34994 US 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: ROB LORD 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MONROE, MARIAN B.
 Name:
 MONROE, MARIAN B.

 Address:
 3435 SE COURT DR
 Address:
 3435 SE COURT DR

 City-St-Zip:
 STUART, FL
 STUART, FL
 34994 US

Title: ASD () Delete Title: ASD (X) Change () Addition Name: HARMAN, RICHMOND Name: ROBITAILLE, MARK

Address: 301 HOSPITAL AVE
City-St-Zip: STUART, FL

ROSITALEE, WARK
ROSITALEE,

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

 Name:
 ROBITAILLE, MARK E.
 Name:
 COCORULLO, L. MARK

 Address:
 301 HOSPITAL AVENUE
 301 HOSPITAL AVENUE

 City-St-Zip:
 STUART, FL 34994
 City-St-Zip:
 STUART, FL 34994 US

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

 Name:
 TAGLIARENI, JOHN
 Name:
 TAGLIARENI, JOHN

 Address:
 201 HOSPITAL AVENUE
 Address:
 201 HOSPITAL AVENUE

 City-St-Zip:
 STUART, FL 34994
 City-St-Zip:
 STUART, FL 34994 US

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

 Name:
 NOBLE, DONALD

 Address:
 301 HOSPITAL AVE

 City-St-Zip:
 STUART, FL 34994

 STUART, FL 34994
 City-St-Zip:

 STUART, FL 34994
 STUART, FL 34994

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

 Name:
 FASANO, JOHN
 Name:

 Address:
 301 HOSPITAL AVENUE
 Address:

 City-St-Zip:
 STUART, FL 34994
 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: MARK ROBITAILLE ASD 04/30/2009

Electronic Signature of Signing Officer or Director

Date