2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21763

FILED Jan 19, 2009 Secretary of State

Entity Name: THE SPINNAKER OF ORMOND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2450 OCEANSHORE BLVD #12

ORMOND BCH., FL 321762422

Current Mailing Address: New Mailing Address:

2450 OCEANSHORE BLVD #12 ORMOND BCH., FL 321762422

FEI Number: 59-2855752 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:

LEO, NAINO JR 2450 OCEANSHORE BLVD. ORMOND BEACH, FL 32176 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete LEO. NAINO JR RAVINELLI, CHERYL Name: Name: 2450 OCEAN SHORE BLVD #3 Address: 2450 OCEAN SHORE BLVD #6 Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

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

Name: BROOKS, JIM Name: Address: 2450 OCEANSHORE BLVD #5 Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip:

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

LEO, NAINO J MASON, MARGARET E Name: Name: 2450 OCEAN SHORE BLVD #3 Address: Address: P. O. BOX 233

City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: SORRENTO, FL 32776

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

Name: Name: LEO, NAINO JR

2450 OCEAN SHORE BLVD #3 Address: Address: City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32176

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: MARGARET E. MASON SD 01/19/2009