2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28181

FILED Feb 18, 2010 Secretary of State

Entity Name: ENGLEWOOD ISLES PARKWAY ASSOCIATION, INC.

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

1811 ENGLEWOOD ROAD 1811 ENGLEWOOD ROAD, #215 SUITE 195 ENGLEWOOD, FL 34223

SUITE 195 ENGLEWOOD, FL 3422 ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

514 N. INDIANA AVE.
ENGLEWOOD, FL 34223

1811 ENGLEWOOD, FL 34223

ENGLEWOOD, FL 34223

FEI Number: 65-1687665 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:

ATRIUM CAM, INC.

514 N. INDIANA AVE
ENGLEWOOD, FL 34223 US

SEABREEZE COMMUNITY ASSOCIATION MGMT, LLC
1811 ENGLEWOOD ROAD, #215
ENGLEWOOD, FL 34223 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: NATALIE FARRISH 02/18/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: I

Name: FLOWERDAY, JAMES R

Address: 344 EDEN DR City-St-Zip: ENGLEWOOD, FL 34223

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Title: VP

Name: COCORAN, DIANNE
Address: 5 OAKWOOD DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: S

Name: SMITH, MARY A

Address: 150 MARINA ISLES PKWY #206 City-St-Zip: ENGLEWOOD, FL 34223

Title: T

Name: GARCIA, LINDA

Address: 250 ENGLEWOOD ISLES PARKWAY #6

City-St-Zip: ENGLEWOOD, FL 34223

I hereby 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 all other like empowered.

SIGNATURE: JAMES R. FLOWERDAY P 02/18/2010