2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29156

FILED May 07, 2009 Secretary of State

Entity Name: THE MASTER'S CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P O BOX 320904 200 NORTH FIRST STREET COCOA, FL 32931 COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** 200 N FIRST ST COCOA BEACH, FL 32931 US FEI Number: 59-2923418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RIGERMAN, MARILYN A 200 N FIRST ST COCOA BEACH, FL 32931 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: () Delete () Change () Addition STOVER, BONNI Name: Name: 5 AZALEA DR Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: () Delete Title: (X) Change () Addition GALLAGHER, MARK Name: GALLAGHER, MARK Name: Address: 1800 MINUTEMAN CSWY #11 Address: 1800 MINUTEMEN CSWY #11 City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: DVP (X) Change () Addition HELM, POLLY MORRIS, MARY Name: Name: 1800 MINUTEMEN CAUSEWAY 19 Address: 2 COUNTRY CLUB RD #27 Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 () Delete Title: Title: (X) Change () Addition Name: DEANGELIS, DINO Name: DEANGELIS, DINO 1800 MINUTEMAN CSWY #17 1800 MINUTEMAN CSWY #17 Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: () Change (X) Addition GATELY, SANDRA Name: Name: 2 COUNTRY CLUB ROAD 25 Address: Address: City-St-Zip: City-St-Zip: COCOA BEACH, FL 32931

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 GALLAGHER P 05/07/2009