2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32257

Apr 13, 2009 Secretary of State

Entity Name: ST. TROPEZ HOMEOWNERS' ASSOCIATION, INC.

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

C/O ATTWOOD-PHILLIPS 385 DOUGLAS AVE

385 DOUGLAS AVE STE 3000 STE 3000

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

C/O ATTWOOD-PHILLIPS 385 DOUGLAS AVE

385 DOUGLAS AVE STE 3000 STE 3000

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3001641 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:

KATZMAN GARFINKEL, P.A. 1501 NW 49TH ST STE 202

FORT LAUDERDALE, FL 33309 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

PIACENTI, BERNIE PIACENTI, BERNIE Name: Name:

1007 INLET WAY Address: 1007 INLET WAY Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: Title: () Delete ROMAN, JIM Name: ROMAN, JIM Name:

Address: 969 CASA DEL SOL CIR Address: 969 CASA DEL SOL CIR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD () Delete Title: DST (X) Change () Addition BOANO, NINA BOANO, NINA Name: Name:

Address:

Address: 991 CASA DEL SOL CIR 991 CASA DEL SOL CIR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: BERNARD PIACENTI DP 04/13/2009