2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37780

FILED Mar 03, 2010 Secretary of State

Entity Name: BERKSHIRE E CV CONDOMINIUM ASSOCIATION, INC.

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

108 BERKSHIRE E 101 BERKSHIRE E

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33417 US

Current Mailing Address: New Mailing Address:

SEACREST SERVICES INC
2400 CENTREPARK W DR #175

BERKSHIRE E C/O SEACREST SERVICES INC
2400 CENTREPARK W DR #175

WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33409 US

FEI Number: 59-1636424 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:

LITZLER, JAMES MARINUCCI, JOSEPHINE 108 BERKSHIRE E 101 BERKSHIRE E

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33417 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: JOSEPHINE MARINUCCI 03/03/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: MARINUCCI, JOSEPHINE Address: 101 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP

Name: SCHNIREL, BRUCE Address: 99 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T

Name: LITZLER, JAMES Address: 108 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: 9

Name: DUQUETTE, DORANNE Address: 97 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title:

Name: SANTIAGO, MIGUEL Address: 102 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: [

Name: HAZAN, LOUIS Address: 106 BERKSHIRE E

City-St-Zip: WEST PALM BEACH, FL 33417 US

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: GALE CORONA MS 03/03/2010