2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N43611

EASTHAMPTON F CONDOMINIUM ASSOCIATION, INC.



Apr 24, 2008 8:00 am Secretary of State

04-24-2008 90116 031 ****61.25

400000-34

Principal Place of Business PRUITTS PROPERTY MGMT 2575 HOMEWOOD RD

SIGNATURE:

Mailing Address PRUITTS PROPERTY MGMT 2575 HOMEWOOD RD

WEST PALM BEACH, FL 33409		WEST PALM BEACH, FL 33409				III AR IMIN NIMI IN IN I	181 BKBN BHBN BLBN	01031 C1C11 013 ¹	TAL OL 1881	
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02202008	Chg-NP	CR2E037	(12/06)		
City & State		City & State	City & State		4. FEI Numbe 59-1652			<u> </u>	plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate of	of Status Desired		8.75 Add ee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
PRUITTS PROPERTY MGMT			Name	Name						
2575 HOM	EWOOD RD LM BEACH, FL 33409		Street Address ((P.O. Box Number is Not Acceptable)				
			City					Zip Code	e	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE										
Fillng Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		Make check porto			
10.	OFFICERS AND DIF	RECTORS	11.			NGES TO OFFIC	ERS AND DIRE	CTORS IN	10	
TITLE	₹P	☐ Delete	TITLE	10 P				Change	Addition	
NAME	GUMINA, SALVATORE		NAME	1	WARNE				•	
STREET ADDRESS City-St-Zip	121 EAST HAMPTON F		STREET ADDRESS	1	STHAMPTON					
	WEST PALM BEACH, FL 33417		CITY-ST-ZIP	WPB	FL 3.	3417				
TITLE NAME	MCALEER, JOHN	Delete	TITLE	B			l	Change	🔀 Addition	
STREET ADDRESS	144 EAST HAMPTON F		NAME STREET ADDRESS		CISCA TO					
CITY-ST-ZIP	WEST PALM BEACH, FL 33417	,	CITY-ST-ZIP	WPB						
TITLE	VP	Delete	~	8	FL 33	<i>H7</i>				
NAME	SILVERMAN, FRED	ED Delete	NAME	1 -	s Gus	TUS.	l	Change	Addition	
STREET ADDRESS	138 EARL HAMTON F		STREET ADDRESS		STHAMPTO					
CITY-ST-ZIP	WEST PALM BEACH, FL 33417		CITY-ST-ZIP	WPB	FL 33	1417				
TITLE	Р	Delete	TITLE					☐ Change	Addition	
NAME	KANARS, SAM		NAME							
STREET ADDRESS CITY-ST-ZIP	129 EASTHAMPTON F		STREET ADDRESS							
	WEST PALM BEACH, FL 33417		CITY-ST-ZIP							
TITLE	S/T	☐ Delete	TITLE					Change	Addition	
NAME STREET ADDRESS	SNYDER, SALLY 126 EAST HAMPTON E		NAME							
City-St-Zip	WEST PALM BEACH, FL 33417		STREET ADDRESS							
TITLE	B		CITY-ST-ZIP	<u> </u>						
NAME	B ABRAMS, SOL	☐ Delete	TITLE				(☐ Change	☐ Addition	
STREET ADDRESS	132 EASTHAMPTON F		NAME Street Address							
CITY-ST-ZIP	WEST PALM BEACH, FL 33417		CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR