

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48224

FILED
Mar 02, 2009
Secretary of State

Entity Name: HIBISCUS-BY-THE-SEA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3870 N A1A
FT PIERCE, FL 34949 US

New Principal Place of Business:

Current Mailing Address:

1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994 US

New Mailing Address:

FEI Number: 65-0334051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, DEBORAH
759 S. FEDERAL HWY STE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

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:

Title: VPD () Delete
Name: SMITH, BRIAN
Address: 3870 N A1A 206
City-St-Zip: FORT PIERCE, FL 34949 US

Title: TD () Delete
Name: KLEIN, JAMES
Address: 3880 N A1A, #603
City-St-Zip: FT PIERCE, FL 34949 US

Title: SD () Delete
Name: STRIEWSKI, ANDREA
Address: 3880 N A1A 301
City-St-Zip: FORT PIERCE, FL 34949 US

Title: D () Delete
Name: ROBINSON, DONALD
Address: 3880 N A1A 1004
City-St-Zip: FORT PIERCE, FL 34949

Title: PD () Delete
Name: SMITH, DARRELL
Address: 3870 N A1A #206
City-St-Zip: FORT PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, BRIAN
Address: 3870 N A1A #206
City-St-Zip: FORT PIERCE, FL 34949 US

Title: VPTD (X) Change () Addition
Name: HALLINAN, MICHAEL
Address: 3870 N A1A #506
City-St-Zip: FT PIERCE, FL 34949 US

Title: SD (X) Change () Addition
Name: STRIEWSKI, ANDREA
Address: 3880 N A1A #301
City-St-Zip: FORT PIERCE, FL 34949 US

Title: D (X) Change () Addition
Name: ROBINSON, DONALD
Address: 3880 N A1A #1004
City-St-Zip: FORT PIERCE, FL 34949

Title: D (X) Change () Addition
Name: FERGUSON, MARTA
Address: 3870 N A1A #1003
City-St-Zip: FORT PIERCE, FL 34949

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: BRIAN SMITH

PRES

03/02/2009

Electronic Signature of Signing Officer or Director

Date