


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

3. **FILED**  
**Mar 19, 2007 8:00 am**  
**Secretary of State**

03-07-2007 90022 047 \*\*\*\*61.25

DOCUMENT # N9400000791			
1. Entity Name EGANS BLUFF EAST HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business <del>2726 LE SABRE PLACE</del> FERNANDINA BEACH, FL 32034 US		Mailing Address PO BOX 15176 FERNANDINA BEACH, FL 32034-103 US	
2. Principal Place of Business - No P.O. Box # 2129 Lumina Court Suite, Apt. #, etc. FB FL City & State		3. Mailing Address Suite, Apt. #, etc. City & State	
4. FEI Number 59-3362890		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMEATON, ROBERT W PD 2726 LE SABRE PLACE FERNANDINA BEACH, FL 32034		7. Name and Address of New Registered Agent Name: Peter Wojciechowski Street Address (P.O. Box Number is Not Acceptable) 2129 Lumina Court City: Fernandina Bch FL Zip Code 32034	
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: <i>Peter Wojciechowski</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE	SD RUPERT, ROSE <input checked="" type="checkbox"/> Delete	TITLE	SD BERRY, PAUL <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2121 CALAIS LN	NAME	2537 Caprice Lane
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	Fernandina Bch, FL 32034
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	TD THELEMANN, NATALIE TD <input type="checkbox"/> Delete	TITLE	PRES. Peter L Wojciechowski <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2637 CAPRICE LANE	NAME	2129 Lumina Court
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	Fernandina Bch FL 32034
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D Vice Pres, KELLER, JIM <input checked="" type="checkbox"/> Delete	TITLE	D Ed Caprice <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2500 CAPRICE LN	NAME	2116 Lumina Court
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	Fernandina Beach FL 32034
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D CANTINI, DONALD D <input checked="" type="checkbox"/> Delete	TITLE	VICE PRES Jim KELLER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2158 CIERA LANE	NAME	2500 Caprice Ln
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	Fernandina Beach FL 32034
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D VALENTINE, RICHARD <input type="checkbox"/> Delete	TITLE	
NAME	2107 LUMINA CT	NAME	
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D BERRY, PAUL <input checked="" type="checkbox"/> Delete	TITLE	
NAME	2537 CAPRICE LN	NAME	
STREET ADDRESS	FERNANDINA BEACH, FL 32034	STREET ADDRESS	
CITY-ST-ZIP		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: <i>Yvonne Sullivan</i>		Date: 3/1/07 (914) 221-7700	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	