2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005612

FILED Apr 20, 2008 Secretary of State

Entity Name: YELLOWFIN BAY CONDOMINIUM ASSOCIATION, INC.

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

GATEWAY MGMT GATEWAY MGMT

23081 HARBORVIEW RD 1532 RIO DE JANEIRO AVE PORT CHARLOTTE, FL 33980 US PUNTA GORDA, FL 33983 US

Current Mailing Address: New Mailing Address:

GATEWAY MGMT
23081 HARBORVIEW RD
GATEWAY MGMT
PO BOX 380758

PORT CHARLOTTE, FL 33980 US MURDOCK, FL 33938 US

FEI Number: 59-3294458 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:

WISHARD, KRISTINA 23081 HARBORVIEW 33980, FL 33919 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: PD (X) Change () Addition Name: SAULNIER, BOB Name: CLARK, WALTER

Address: 206 BIG PINE LANE Address: PO BOX 380758

City-St-Zip: PUNTA GORDA, FL 33955 US City-St-Zip: MURDOCK, FL 33938 US

Title: S () Delete Title: VPD (X) Change () Addition Name: LEVITRA, JOYCE Name: MUSCARELLA, LARRY

Address: 102 BIG PINE LANE Address: PO BOX 380758
City-St-Zip: PUNTA GORDA, FL 33955 US City-St-Zip: MURDOCK, FL 33938 US

Title: PD () Delete Title: SD (X) Change () Addition Name: CLARK, WALTER Name: KRONE, DOROTHY

Address: 110 BIG PINE LANE Address: PO BOX 380758
City-St-Zip: PUNTA CORDA EL 33955 US

City-St-Zip: PUNTA GORDA, FL 33955 US City-St-Zip: MURDOCK, FL 33938 US

Title: VP () Delete Title: TD (X) Change () Addition

 Name:
 MUSCARELLA, LARRY
 Name:
 BLOOM, MARTIN

 Address:
 59 BIG PINE LN
 Address:
 PO BOX 380758

 City-St-Zip:
 PUNTA GORDA, FL 33955 US
 City-St-Zip:
 MURDOCK, FL 33938 US

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 CARLISLE, SUSAN

 Address:
 Address:
 PO BOX 380758

 City-St-Zip:
 City-St-Zip:
 MURDOCK, FL 33938 US

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: WALTER CLARK PD 04/20/2008