

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: C.A.U. EAGLES POINTE, INC.

Current Principal Place of Business:

3501 TOWNSEND BLVD
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

1220 EAST 42ND STREET
SUITE 3605
NEW YORK, NY 10168 US

New Mailing Address:

FEI Number: 31-1484299 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 323012525 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: DPT
Name: BURNS, RICHARD F
Address: 122 EAST 42ND STREET, SUITE 3605
City-St-Zip: NEW YORK, NY 10168

Title: DVS
Name: WIEDORFER, JOSEPH P
Address: 1090 VERMONT AVENUE, N.W., SUITE 400
City-St-Zip: WASHINGTON, DC 20005

Title: D
Name: VACCARO, THOMAS
Address: 122 EAST 42ND STREET, SUITE 3605
City-St-Zip: NEW YORK, NY 10168

Title: VP
Name: MITCHELL, FRED C
Address: 122 EAST 42ND STREET, #3605
City-St-Zip: NEW YORK, NY 10168

Title: VP
Name: HOPPS, GLENN F
Address: 122 EAST 42ND ST STE 3605
City-St-Zip: NEW YORK, NY 10168

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: THOMAS G. VACCARO

VP

01/05/2011

Electronic Signature of Signing Officer or Director

Date