2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# N99000006772

Entity Name: INTRACOASTAL ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

464 COASTAL BREEZE WAY
MERRITT ISLAND, FL 32953 US

New Principal Place of Business:

Current Mailing Address:

464 COASTAL BREEZE WAY
MERRITT ISLAND, FL 32953 US

New Mailing Address:

FEI Number: 59-3611732 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCDONALD, DAVID R PRES
464 COASTAL BREEZE WAY
MERRITT ISLAND, FL 32953 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: P ( ) Delete
Name: MCDONALD, DAVE
Address: 464 COASTAL BREEZE WAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V ( ) Delete
Name: MORGAN, AARON
Address: 452 COASTAL BREEZE WAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T ( ) Delete
Name: GOOCH, PEGGY
Address: 423 COASTAL BREEZE WAY
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MCDONALD, DAVID
Address: 464 COASTAL BREEZE WAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V (X) Change ( ) Addition
Name: PEPLOW, DON
Address: 434 COASTAL BREEZE WAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DAVID R. MCDONALD PRES 04/27/2008

Electronic Signature of Signing Officer or Director — Date