

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759448

FILED
Mar 04, 2009
Secretary of State

Entity Name: EAGLE'S NEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1225 N. WICKHAM RD.
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 100130
PALM BAY, FL 32910 US

New Mailing Address:

FEI Number: 59-2789307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAKOWSKI, EDWARD J
1225 N WICKHAM ROAD
SUITE 721
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

THORNE, JIM
1225 N WICKHAM ROAD
SUITE 112
MELBOURNE, FL 32935 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: SARA BERNIN

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: MAKOWSKI, EDWARD
Address: 1225 N WICKHAM RD S721
City-St-Zip: MELBOURNE, FL

Title: PD () Delete
Name: THORNE, JIM
Address: 1225 N WILHAM RD
City-St-Zip: MELBOURNE, FL 32935

Title: VP () Delete
Name: MAINES, KEENE
Address: 2551 VERMONT ST
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: THORNE, JIM
Address: 1225 N WICKHAM RD S112
City-St-Zip: MELBOURNE, FL 32935

Title: VP (X) Change () Addition
Name: MCMAHAN, DALE
Address: 4142 TWIN OAKS BLVD
City-St-Zip: MELBOURNE, FL 32901

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: SARA BERNIN

AGNT

03/04/2009

Electronic Signature of Signing Officer or Director

Date