

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

3, **FILED**
Apr 07, 2008 8:00 am
Secretary of State

03-17-2008 90006 049 ****61.25

DOCUMENT # 703970 1. Entity Name MASSACHUSETTS CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1536 S E 15TH COURT DEERFIELD BEACH, FL 33441		Mailing Address 1536 S E 15 CRT DEERFIELD BEACH, FL 33441	
2. Principal Place of Business - No P.O. Box # Go Benchmark Property Mgmt 7932 Wiles Road Coral Springs, FL 33067-1154		3. Mailing Address Go Benchmark Property Mgmt 7932 Wiles Rd Coral Springs, FL 33067-1154	
4. FEI Number 59-1201326		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERT KAYE & ASSOCIATES, P.A. 6261 NORTHWEST 6TH WAY, SUITE 103 FT LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP P MAQEE, BRUCE 1536 SE 15 COURT #601 DEERFIELD BEACH, FL 33441	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VP Fagan, Joe 1536 SE 15th Court #109 Deerfield Beach FL 33441	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP T SMITH, BARBAN 1536 SE 15TH COURT #706 DEERFIELD BEACH, FL 33441	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Blitz, Barry cnav 1B, Tara Gadiz, Spain 11520	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D PURCELL, AL 1536 SE 15TH CT #403 DEERFIELD BEACH, FL 33441	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Ficrimonte, Anthony 333 N. Ocean Blvd. #1622 Deerfield Beach FL 33441	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D GOODMAN, DENNIS 1536 SE 15 CT #205 DEERFIELD BEACH, FL 33441	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Krizik, Patricia 1536 SE 15th Court Deerfield Beach FL 33441	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP S PURCELL, CAROLYN 1536 SE 15 COURT #503 DEERFIELD BEACH, FL 33441	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D McNeely, Nancy 1536 SE 15th Court #6402 Deerfield Beach FL 33441	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP P MCGONAGLE, DAN 247 SOUTH DRIVE BASS RIVER, MA 02864	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
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 lists empowered.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4-2-2008 Daytime Phone # _____	