## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 722877** 

Apr 22, 2010 Secretary of State

Entity Name: BERKLEY HOUSE OF PORT CHARLOTTE- A CONDOMINIUM, INC.

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

CHARLOTTE SQUARE CONDOMINIUMS MANAGER'S OFFICE 2296 AARON STREET PORT CHARLOTTE, FL 33952

**New Mailing Address: Current Mailing Address:** 

CHARLOTTE SQUARE CONDOMINIUMS MANAGER'S OFFICE 2296 AARON STREET PORT CHARLOTTE, FL 33952

FEI Number: 59-1574987 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:

MOORE, DON PALUMBO, FRANK C/O MANAGEMENT OFFICE C/O MANAGEMENT OFFICE 2296 AARON STREET 2296 AARON STREE PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33952 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: FRANK PALUMBO 04/22/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

PALUMBO, FRANK Name: Address: 21300 BRINSON AVE #220 City-St-Zip: PORT CHARLOTTE, FL 33952

Title:

Name: CHIARELLO, ED Address: 21300 BRINSON AVE #211 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: TD

MOORE, SUSAN Name:

Address: 21300 BRINSON AVE #116 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SD

Name: MOORE, SUSAN

Address: 21300 BRINSON AVE #116 City-St-Zip: PORT CHARLOTTE, FL 33952

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: FRANK PALUMBO **PRES** 04/22/2010