# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 08, 2009**
**Secretary of State**

DOCUMENT# 742742

**Entity Name:** ANDOVER K CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O JENNIE SCHECHTER
259 ANDOVER K
WEST PALM BEACH, FL 334172606

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JENNIE SCHECHTER
259 ANDOVER K
WEST PALM BEACH, FL 334172606

**New Mailing Address:**

**FEI Number: 59-1636128** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHECHTER, JENNIE
ANDOVER K-259
WEST PALM BEACH, FL 33417 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: D ( ) Delete
Name: BONENFANT, JACQUES
Address: 272 ANDOVER K
City-St-Zip: WEST PALM BEACH, FL 33417

Title: P ( ) Delete
Name: ROSENBERG, LILA
Address: 260 ANDOVER K
City-St-Zip: W PALM BCH, FL

Title: P ( ) Delete
Name: BELEC, PIERRE
Address: 271 ANDOVER K
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V ( ) Delete
Name: ST MARIE, MARCEL
Address: 274 ANDOVER K
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T ( ) Delete
Name: SCHECHTER, JENNIE
Address: ANDOVER K-259 CEN VILL
City-St-Zip: W PALM BEACH, FL

Title: D ( ) Delete
Name: LENNO, ROBERT
Address: 272 AN DOVEK
City-St-Zip: WEST PALM BEACH, FL 33417

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: JENNIE SCHECHTER TRES 03/08/2009

Electronic Signature of Signing Officer or Director — Date