2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#747829

FILED Jan 26, 2009 Secretary of State

Entity Name: MARGATE ASSOCIATION OF CONDOMINIUMS, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
7300 LAKI	IARD DWORK E CIRCLE DR E, FL 33063				
Current Mailing Address:			New Maili	New Mailing Address:	
7300 LAKE CIRCLE DR				7300 LAKE CIRCLE DR APT 207	
# 207 MARGATE, FL 33063		# 207 MARGATE, FL 33063			
FEI Number	r: 59-2245835	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
MARGATI	IDAY SPRING E, FL 33063	US	purpose of changing it	ts registered office or registered agent, or both,	
	e of Florida.				
SIGNATU		wie Oissantsser of Descieta and Ass	- · · · ·	Dete	
		nic Signature of Registered Ag		Date	
OFFICER	S AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PUMILIA, FRA	Y SPRINGS BLVD # 101	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V (LICHTENSTEI 7605 NW 4TH MARGATE, FL	PL	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	HAGGEN, DOI 1005 COUNTE) Delete NALD E YY CLUB DR. #2408 ACH, FL 33063 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HAUGEN, DONALD E 1005 COUNTRY CLUB DR. #Z408 POMPANO BEACH, FL 33063 US	
Title: Name: Address: City-St-Zip:	DWORKIN, RI	RCLE DR # 207	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CHOROST, H/ 7591 NW 1ST MARGATE, FL	ST #107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SIEGAL, JOSI 3011 HOLIDA) Delete EPH Y SPRINGS BLVD 103 ACH, FL 33063	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: FRANK P. PUMILIA PRES 01/26/2009