

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# 755993

Entity Name: 7 EAST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

535 NE 7 AVENUE  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

535 NE 7 AVENUE  
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 59-2478232      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MOODY, HOLLEY E  
2900 E OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33306      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: PD      ( ) Delete  
Name: FEJES, FRED  
Address: 543 NE 7TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VPD      ( ) Delete  
Name: SALCEDO, MICHELE  
Address: 567 NE 7TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: SC      ( ) Delete  
Name: MICHELNA, WENDY  
Address: 551 NE 7TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: TR      ( ) Delete  
Name: OLDAKER, ALFRED  
Address: P.O. BOX 11402  
City-St-Zip: FORT LAUDERDALE, FL 33339

Title: D      ( ) Delete  
Name: GOLDMAN, DAVID  
Address: 599 NE 7TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 3301

**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:

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: ALFRED E. OLDAKER

TR

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date