

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002608

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** WILES ROAD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

11866 WILES ROAD  
CORAL SPRINGS, FL 330762211 US

**New Principal Place of Business:**

**Current Mailing Address:**

11866 WILES ROAD  
CORAL SPRINGS, FL 330762211 US

**New Mailing Address:**

**FEI Number:** 65-1122497

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARPELES, RICHARD  
11872 NW 2ND CT  
CORAL SPRINGS, FL 33071 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:** VSD  
**Name:** JONES, GAIL  
**Address:** 11866 WILES ROAD  
**City-St-Zip:** CORAL SPRINGS, FL 33076

**Title:** S  
**Name:** SWILL, CRAIG  
**Address:** 11866 WILES ROAD  
**City-St-Zip:** CORAL SPRINGS, FL 33076

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:** GAIL JONES

VSD

03/25/2010

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

\_\_\_\_\_  
Date