

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03025

FILED
Jan 16, 2009
Secretary of State

Entity Name: EXECUTIVE WEST OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2815 W. NEW HAVEN AVE. #204
MELBOURNE, FL 32904

New Principal Place of Business:

2815 W. NEW HAVEN AVE.
SUITE 204
MELBOURNE, FL 32904

Current Mailing Address:

2381 ARIZONA STREET
MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 34-2065165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODOM, DAN C
2815 WEST NEW HAVEN AVENUE
SUITE 204
WEST MELBOURNE, FL 32904 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: ODOM, DAN C.,
Address: 2815 W NEW HAVEN AVE 204
City-St-Zip: W MELBOURNE, FL

Title: TD () Delete
Name: ROWSE, JAMES,
Address: 2381 ARIZONIA STREET
City-St-Zip: MELBOURNE, FL 32904

Title: VSD () Delete
Name: ARCADIER, MAURICE
Address: 2815 W NEW HAVEN AVE 304
City-St-Zip: WEST MELBOURNE, FL 32904

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:

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: JAMES W. ROWSE

DIR

01/16/2009

Electronic Signature of Signing Officer or Director

Date