

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009458

FILED
Apr 17, 2009
Secretary of State

Entity Name: WILTON COMMONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8360 W OAKLAND PARK BLVD
SUITE 301
SUNRISE, FL 33351

New Principal Place of Business:

1133 S. UNIVERSITY DRIVE
SUITE 211
PLANTATION, FL 33324

Current Mailing Address:

PO BOX 452199
SUNRISE, FL 33345

New Mailing Address:

PO BOX 19439
PLANTATION, FL 33318

FEI Number: 20-2574068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 S PINE ISLAND RD #540
PLANTATION, FL 33324 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: DVP () Delete
Name: PIERRE-LOUIS, JEAN-BERNARD
Address: 300 S PINE ISLAND RD #304
City-St-Zip: PLANTATION, FL 33304

Title: DP () Delete
Name: BROWN, MIRIAM L
Address: 22759A MANDEVILLE PL
City-St-Zip: BOCA RATON, FL 33433

Title: DST () Delete
Name: FORMAN, HOWARD
Address: 301 EAST 66TH STREET #10J
City-St-Zip: NEW YORK, NY 10021

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: MIRIAM L. BROWN

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04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date