

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009175

FILED
Jan 12, 2007
Secretary of State

Entity Name: BILTMORE COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

841 S.W. MUNJACK CIRCLE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

1258 SW BILTMORE ST
PORT ST. LUCIE, FL 34983

Current Mailing Address:

841 S.W. MUNJACK CIRCLE
PORT ST. LUCIE, FL 34986

New Mailing Address:

1258 SW BILTMORE ST
PORT ST. LUCIE, FL 34983

FEI Number: 20-3594973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONDEAU, CAROL
841 SW MUNJACK CIRCLE
PORT ST. LUCIE, FL 34986 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: RONDEAU, CAROL
Address: 841 SW MUNJACK CIR.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VPD () Delete
Name: BROOKS, MARK
Address: 43 WEST PLAZA DEL SOL
City-St-Zip: ISLAMORADA, FL 34986

Title: STD () Delete
Name: WILLIAMS, JOY
Address: 12856 ARROWWOOD DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WAKIM, ROLAND
Address: 5815 BALSAM DR.
City-St-Zip: FT PIERCE, FL 34982

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: GONZALEZ, JUDY
Address: 1258 SW BILTMORE ST.
City-St-Zip: PT ST LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDY GONZALEZ

STD

01/12/2007

Electronic Signature of Signing Officer or Director

Date