

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# N05000010844

Entity Name: COURTHOUSE BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1010 KENNEDY DRIVE
SUITE 305
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

5505 N. ATLANTIC AVE.
SUITE 207
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 20-4635223 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALLISON, JOHN R III
6803 OVERSEAS HWY
MARATHON, FL 33050 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: D () Delete
Name: MCGRAFF, PATRICIA
Address: 300 SOUTHARD
City-St-Zip: KEY WEST, FL 33040

Title: P () Delete
Name: WALKER, LINDA A
Address: 63 TWO TURTLES LN.
City-St-Zip: SHARK KEY, FL 33040

Title: D () Delete
Name: HEADRICK, KAREN
Address: 1010 KENNEDY DRIVE, SUITE 305
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCFADDEN, VICTORIA
Address: 300 SOUTHARD 106
City-St-Zip: KEY WEST, FL 33040

Title: T (X) Change () Addition
Name: GOLAN, KEITH
Address: 1500 ATLANTIC BLVD UNIT 109
City-St-Zip: KEY WEST, FL 33040

Title: VP/S (X) Change () Addition
Name: HEADRICK, KAREN
Address: 1010 KENNEDY DRIVE, SUITE 305
City-St-Zip: KEY WEST, FL 33040

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: MARK EVANS

CAM

04/09/2008

Electronic Signature of Signing Officer or Director

_____ Date