2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17530

FILED Mar 15, 2007 Secretary of State

Entity Name: ANDROS VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1310 AVEN	IUE OF THE STAF	RS			
COCONUT	CREEK, FL 3306	66 US			
Current Ma	ailing Address:		New Mailing Addres	ss:	
	IUE OF THE STAF CREEK, FL 3306				
FEI Number:	59-2656712 FE	I Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Curre	ent Registered Agent:	Name and Address	of New Registered Agent:	
	NDLER IUE OF THE STAF CREEK, FL 3300				
The above in the State		nits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	E:				
	Electronic Si	ignature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VPD () Dele BERKOW, ED 1702 ANDROS ISLE COCONUT CREEK,	, APT C-1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () Dele BULGACH, HAROLD 1701 ANDROS ISLE COCONUT CREEK, I	, APT. B-1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Dele FRIEDMAN, DAVID 1704 ANDROS ISLE COCONUT CREEK, I	APT A-3	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () Dele BERMAN, LOU 1703 ANDROS ISLE COCONUT CREEK, I	APT F3	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () Dele MEYERSON, HELEN 1705 ANDROS ISLE COCONUT CREEK,	IA APT F-4	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DAVID FRIEDMAN P 03/15/2007