

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 10, 2009
Secretary of State**

DOCUMENT# N18055

Entity Name: THE 160 CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O JOHN G SALATINO
160 SE 6TH AVE B-1
DELRAY BCH, FL 33483

New Principal Place of Business:

Current Mailing Address:

C/O JOHN G SALATINO
160 SE 6TH AVE B-1
DELRAY BCH, FL 33483

New Mailing Address:

FEI Number: 59-6861731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SALATINO, JOHN G
160 SE 6TH AVE B-1
DELRAY BCH, FL 33483 US

Name and Address of New Registered Agent:

SALATINO, JOHN G
160 SE 6TH AVE
B-1
DELRAY BCH, FL 33483 US

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: _____ Date: 05/10/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SALATINO, JOHN G
Address: 160 SE 6TH AVE B-1
City-St-Zip: DELRAY BEACH, FL

Title: DS () Delete
Name: SALATINO, VALERIE
Address: 160 SE 6TH AVE B-1
City-St-Zip: DELRAY BCH, FL

Title: VD () Delete
Name: HARRIGON, PETER
Address: 160 SE 6TH AVE A-1
City-St-Zip: DELRAY BEACH, FL 33483

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: JOHN G. SALATINO PD 05/10/2009
Electronic Signature of Signing Officer or Director Date